

(Re	questor's Name)	
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PICK-UP		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer.	

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08/28/06--01020--021 **78.75



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COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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طريد

SUBJECT: T. G. REHAB INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

STO.00 Filing Fee ✓\$78.75Filing Fee & Certificate of Status

 \$78.75
 \$87.50

 Filing Fee
 Filing Fee,

 & Certified Copy
 Certified Copy

 & Certificate of Status
 Status

 ADDITIONAL COPY REQUIRED
 Status

FROM:			
	Name (Printed or typed)	<u> </u>	
	13430 SW 19 ST		
	Address	· _	
	MIRAHAR FL 33027		
·	City, State & Zip		
	(954) 430 0281		
· · · · · · · · · · · · · · · · · · ·	Daytime Telephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION OF

T G Rehab Inc.

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE ONE = N A M E

The name of the corporation shall be:

T. G. Rehab Inc.

ARTICLE TWO = Principal Office

The principal place of business of this corporation is:

13430 SW 19th Street Miramar, Florida 33027

ARTICLE THREE = Purpose

The purpose for which the corporation is organized is: to engage in or transact any or all lawful activities or business permitted under the laws on the United States, The State of Florida, or any other state, country, territory or nation.

ARTICLE FOUR = Shares .

The Aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any time is: ONE HUNDRED SHARES (100) AT A PAR VALUE OF \$1.00 per share.

ARTICLE FIVE = Initial Officers/Directors

The names and street addresses of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until their successors are elected are :

TERESA GIRALDO - P MILAMAR, FL 33027

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this ______ day of <u>AUGUST</u>. of 2006.

iRAIdo RESA Name

State of FLORIDA County of MIAMI DADE

The FOREGOING instrument was acknowledged and sworn to before me this <u><u>IPTH</u></u> day of <u>AUGUST</u> of 2006, by Teresa Giraldo of T G Rehab Inc

MANUEL RODRIGUEZ Notery Public - State of Florida y Commission Expires Jan 4, 2009 Commission # DD383605 londed By National Notary Assn. commiss

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CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 Florida Statues, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

T. G. Rehab Inc

2. The name and address of the registered agent is:

13430 SW 19th Street Teresa Ginaldo Miramar, Florida 33027

3. The name and address of the registered office is:

T. G. Rehab Inc 13430 SW 19th Street Miramar, Florida 33027

Signature Corporate

President Title: 08/18/06 Date

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUES.

AUG 28 AM 9: 28 Covaldo icol Teresa Giraldo Registered Agent 8/18/06 Date