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Division of Corporations

Fax Number : (850)205-0381

Account Name : THE TAX MAN, INC. Account Number : I19990000042 Phone : (561)799-3810 Fax Number : (561)799-1818

FLORIDA.PROFIT/NON PROFIT CORPORATION

THERAPEUTIC WELLNESS & REHABILITATION, INC.

Certificate of Status	
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ALCHETARY OF STATE
FALLARIASSEE FLORIDA

ARTICLES OF INCORPORATION

OF

THERAPEUTIC WELLNESS & REHABILITATION, INC.

ARTICLE I

NAME

The name of this corporation is THERAPEUTIC WELLNESS & REHABILITATION, INC.

ARTICLE II

NATURE OF BUSINESS

This Corporation may engage in any business activity or business permitted under the laws of The United States and the State of Florida.

ARTICLE III

CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is ONE THOUSAND (1,000) SHARES of common stock having \$1.00 par value.

ARTICLE IV

INITIAL CAPITAL

The amount of capital that this Corporation will begin with is FIVE HUNDRED (\$500.00) DOLLARS.

ARTICLE V

TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VI

INITIAL REGISTERED OFFICE AND AGENT

The address in the State of Florida of the principle office of this Corporation is 11706 Bay Breeze Court, West Palm Beach, Florida, 33414, and the name of the initial registered agent at this address is Jeanine Heria.

ARTICLE VII

INITIAL BOARD OF DIRECTORS

The Corporation shall have one (1) director initially. The number of directors may either be increased or diminished from time to time by the by-laws, but shall never be less than one.

ARTICLE VIII

INITIAL DIRECTORS

Jeanine Heria

11706 Bay Breeze Court West Palm Beach, FL 33414

ARTICLE IX

INCORPORATORS

The name and address of the person signing these articles of incorporation is:

Jeanine Heria

11706 Bay Breeze Court West Palm Beach, FL 33414

IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of incorporation this 13 th day of November, 2006.

STATE OF FLORIDA

COUNTY OF PALM BEACH

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, Jeanine Heria, personally appeared, and known by me to be the person who executed these articles of incorporation.

IN WITNESS THEREOF, I have hereunto set my hand and official seal, in the state and county aforesaid, this /3 th day of November 2006.

{SEAL}

VERONIQUE JORDAN

Control DD00371656
Expires 6/23/2008
Bonded Bru (600)M32-4264
Fiorida Notary Assn., Inc.

Notary Public for l

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48,091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST—THERAPEUTIC WELLNESS & REHABILITATION, INC. DESIRES TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPLE PLACE OF BUSINESS AT THE CITY OF WEST PALM BEACH, PALM BEACH COUNTY, STATE OF FLORIDA, HAS NAMED JEANINE HERIA AT 11706 BAY BREEZE COURT, WEST PALM BEACH, STATE OF FLORIDA AS ITS AGENT TO ACCEPT PROCESS WITHIN FLORIDA.

SIGNED

TITLE

DATE November 13

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN ACCORDANCE WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNED

Jeantne Heria

Resident Agent

DATE

November 13

