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Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Certified Copy Walk in ☐ Mail out Photocopy Certificate of Status Will wait **NEW FILINGS** AMENDMENTS. Profit → Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS REGISTRATION/QUALIFICATION** Annual Report □ Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

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ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

ET Rehabilitation center inc

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

07 APR -6 AM ID: 22

<u>ARTICLE V - INCORPORATOR</u>

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The name and street address of the incorporator to these Articles of Incorporation is:

Enilie tapanes 8150 sus 8 st suite 216 Miani Ploeide 33144

The undersigned incorporator has executed these Articles of April Incorporation this 0.5 day of 2007

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Emilio tapanes President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature