

PA 7000087548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

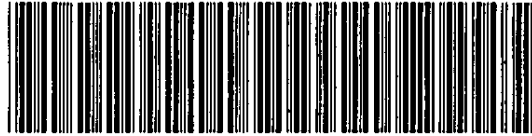
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 AUG -2 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pa

COVER LETTER

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

SUBJECT: Quantum Shifts, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: MARK + ELIZABETH BUSCH
Name (Printed or typed)

705 Taylor St.
Address

Chelsea, MI 48118
City, State & Zip

407-616-0315
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: *Quantum shifts, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *522 MOCCASIN CT.*

Casselberry, FL 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

provide physical therapy services

ARTICLE IV SHARES

The number of shares of stock is:

10 @ \$100.00 share = \$1000

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

- 1) Elizabeth Busch - Director / CEO 522 MOCCASIN CT. Casselberry, FL 32707*
- 2) MARK Busch - Director / COO 522 MOCCASIN CT. Casselberry, FL 32707*

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MARK Busch 522 MOCCASIN CT. Casselberry, FL 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK Busch 522 MOCCASIN CT. Casselberry, FL 32707

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

MARK Busch

 Signature/Registered Agent

MARK Busch

 Signature/Incorporator
 MARK Busch

7/30/07

 Date

7/30/07

 Date