

AUG. 31 11:55AM CAPITAL CONNECTION

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To: Division of Corporations
Fax Number : (850)203-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

YC THERAPY, INC

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T. Burch SEP 04 2007.

ARTICLES OF INCORPORATION

OF

YC THERAPY, INC

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is YC THERAPY, INC

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ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 8421 Baymeadows Way, Suite 2, Jacksonville, FL 32226

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$.01) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **William L. Durdan, III, 1804 San Marco Place, Jacksonville, Florida 32207**

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is **Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.**

ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officer and Director of the corporation is:
Yosong Chang, President, 8421 Baymeadows Way, Suite 2, Jacksonville, FL 32226

The undersigned has executed these Articles of Incorporation this 31st day of August 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"



CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: Y.C. Therapy, Inc

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

WILLIAM L. DURDEN III

1804 SAN MARCO PLACE

JACKSONVILLE, FLORIDA 32207

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

