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HAMM THERAPY SERVICES, P.A. 3526 ROSEWOOD CIRCLE LYNN HAVEN, FL 32444

November 15, 2007

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

SUBJECT: Hamm Therapy Services, P.A.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for \$87.50 to cover the Filing Fee, Certified Copy & Certificate of Status.

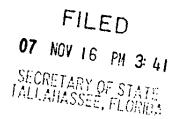
Sincerely,

Wyndi Hamm, President

3526 Rosewood Circle

Lynn Haven, FL 32444

850.248.9343



ARTICLES OF INCORPORATION

<u>OF</u>

HAMM THERAPY SERVICES, P.A.

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 professional corporation shall be:

Hamm Therapy Services, P.A.

ARTICLE II PRINCIPAL OFFICE

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

3526 Rosewood Circle Lynn Haven, FL 32444

ARTICLE III SPECIFIC PURPOSE

The purpose of this professional corporation is to provide counseling and case management services.

ARTICLE IV CAPITAL STOCK

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

1000 Shares of Common Stock @ \$1.00 Par Value

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Wyndi Hamm (Sole Director & Stock Holder) 3526 Rosewood Circle Lynn Haven, FL 32444

ARTICLE VI INCORPORATOR(S)

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

Wyndi Hamm (Sole Director & Stock Holder) 3526 Rosewood Circle Lynn Haven, FL 32444

The undersigned has (have) executed these Articles of Incorporation this
15 day of November, 2007.
Cyndittamm, president Signature/Title
Signature/Title
Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of section 607.0501, Florida Statutes, 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: Hamm Therapy Services, P.A.
 - 2. The name and address of the registered agent and office is:

Wyndi Hamm 3526 Rosewood Circle Lynn Haven, FL 32444

SIGNATURE

TITLE

President (Sole Director & Stockholder)

DATE

November 15, 2007

HAVING BEEN NAMES AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTICATE, 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.

SIGNATURE

DATE

November 13, 2007

REGISTERED AGENT FILING FEE: \$35.00