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Florida Department of State

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION RICARDO Y. HIDALGO, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

T. Buren JAN 10 2010

ARTICLES OF INCORPORATION

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 shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	Ricardo Y. Hidalg	o, P.A.	Ž010 J	
The principle place of ourmost maning secures is.	Principal Address: 1695 Bayhi Oldsmar, F	***	AN -6	
	Malling Address: 1695 Bayhi Oldsmar, F		₽	
ARTICLE III SHARES The number of shares of stock this corporation is authorized to have outstanding at any one time is: One-Thousand (1,000) Shares Common Stock		(37 <u>77</u>)	4: 34	

ARTICLE IV INITIAL REGISTERED AGE				
The name and Florida street address of the initial reg	istered agent is: Ricardo Hidalgo 1695 Bayhill Drive	Effective Date	Jan	012010
•	Oldemar Et 34677			

ARTICLE V	INCORPORATORS			
The name and ac	idress of the incorporators	to these Article	s of incorporation	m are:

Ricardo Hidalgo 1695 Bayhill Drive Oldsmar, FL 34677

ARTICLE VI OFFICERS The officer(s) of the corporation are: Ricardo Hidalgo – President, Secretary, Treasurer 1695 Bayhill Drive

Oldsmar, FL 346??

ARTICLE VII DIRECTORS The director(s) of the corporation are: Ricardo Hidalgo -- Director

1695 Bayhill Drive Oldsmar, FL 34677

ARTICLE VIII BUSINESS PURPOSE	
The business purpose of this corporation is:	Physical Therapy

ARTICLE IX EFFECTIVE DATE	
The effective date of this corporation is:	January 1, 2010

Colon Signature Grand Date Date

Having been named as registered agent and to accept service of process for the above stated corporation at the piace 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.

Signature Agout Date Date