Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION GABLES THERAPY INC.

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SECRETARY OF STATE
TALL AMASSES FOR

ARTICLES OF INCORPORATION

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:

Gables therapy inc.

ARTICLE II - PRINCIPAL OFFICE

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

1890 S.W 57 Ave. Suite 109. Miomi Florida. 33155

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:

Florida 33155

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

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

JOSE Manuel Liens 1890 SW 57 AVE Suite 109 Miami FL 33155

The undersigned incorporator has executed these Articles of Incorporation this 29 day of March 20 1....

ARTICLE VI- DIRECTOR (S)

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

JOSE Manuel LIENS (P) Marcos R. LEDO (VP)

<u>CERTIFICATE OF DESIGNATION OF REGISTERED AGENT</u> /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