

9/22/14

Division of Corporations

## Florida Department of State

Division of Corporations

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## FLORIDA PROFIT/NON PROFIT CORPORATION

Cooper City Physical Therapy Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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## 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:

**Cooper City Physical Therapy Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

11909 SW 47th Street  
Cooper City, FL 33330

### ARTICLE III SHARES

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

1,500 Shares at No Par Value

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Anila Umar  
11909 SW 47th Street  
Cooper City, FL 33330

***Prepared By:***

**Bruce B. Hubbard**  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

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

Anila Umar - President/Director  
11909 SW 47th Street, Cooper City, FL 33330

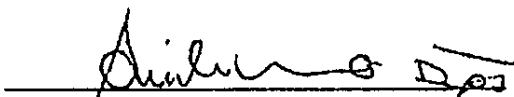
ARTICLE VI INCORPORATOR(S)

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

Anila Umar  
11909 SW 47th Street, Cooper City, FL 33330

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15th day of September 2014



Anila Umar  
Signature

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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Cooper City Physical Therapy Inc.

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


Anila Umar  
Name

11909 SW 47th Street  
(P.O. Box or Mail Drop Box NOT Acceptable)

Cooper City, FL 33330  
(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

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Anila Umar  
SIGNATURE

09/15/2014  
(Date)

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