# **Electronic Articles of Incorporation For**

P15000001161 FILED January 05, 2015 Sec. Of State vherring

INJURY REHABILITATION CENTERS OF CENTRAL FLORIDA, INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

INJURY REHABILITATION CENTERS OF CENTRAL FLORIDA, INC

## **Article II**

The principal place of business address:

2639 WEST STATE ROAD 434 LONGWOOD, FL. 32779

The mailing address of the corporation is:

2639 WEST STATE ROAD 434 LONGWOOD, FL. 32779

#### Article III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

## Article IV

The number of shares the corporation is authorized to issue is: 100

#### Article V

The name and Florida street address of the registered agent is:

ROBIN L MINGORANCE 2639 WEST STATE ROAD 434 LONGWOOD, FL. 32779

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ROBIN L MINGORANCE

## **Article VI**

The name and address of the incorporator is:

CESAR N. ABIERA 2639 WEST STATE ROAD 434

LONGWOOD, FL 32779

Electronic Signature of Incorporator: CESAR N. ABIERA

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

### **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P CESAR N ABIERA 2639 WEST STATE ROAD 434 LONGWOOD, FL. 32779

#### **Article VIII**

The effective date for this corporation shall be:

01/01/2015

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