

03/02/2033

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**P15000036089**

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
OLIVERO THERAPY REHABILITATION INC**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 APR 21 PM 12:53

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H15000097222

**ARTICLE I NAME:** The name of the corporation is:Olivero Therapy Rehabilitation Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3383 NW 7stSuite #306Miami FL 33125**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**P: Pedro Olivero  
  
  
  
  
**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Pedro Olivero3383 NW 7ST Suite #306Miami FL 33125**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Pedro Olivero3383 NW 7ST Suite #306Miami FL 33125SECRETARY OF STATE  
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**Required Signatures:**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***Having been named as registered agent to accept service of process for the above-stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity***

Pedro Oliver

Registered Agent

Date

***I submit this document and affirm that the facts stated herein are true. I am aware that the 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.***

Pedro Oliver

Incorporator

Date