### Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION PHYSICAL THERAPY REHAB & WELLNESS NORTH MEAMI

BEACH, INC.

Certificate of Status	0
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### 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 1 -- NAME**

The name of the corporation shall be:

PHYSICAL THERAPY REHAB & WELLNESS NORTH MIAMI BEACH, INC.

### **ARTICLE 2 – PRINCIPAL OFFICE**

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

16600 NE 8 Avenue North Miami Beach, FL 33162

### **ARTICLE 3 – SHARES**

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

One hundred (100) shares; \$1.00 par value.

# ARTICLE 4 – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Migdalia Martinez 861 East 17 Street Hialeah, FL 33010 JUL 13 AH 8: 2

### ARTICLE 5 - INCORPORATOR

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

Roberto Allaga 16600 NE S Avenue North Mismi Beach, FL 33162

### ARTICLE 6 - DIRECTORS

Roberto Allaga - President 16600 NE 8 Avegue North Mismi Beach, FL 33162

Roberto Alaga President

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant To the provisions of sections 607.0501 or 617.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the designation of the registered agent/registered office, in the State of Florida.

1. - The name of the Corporation is:

#### PHYSICAL THERAPY REHAB & WELLNESS NORTH MIAMI BEACH, INC.

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

Migdalia Martinez 861 East 17 Street Hialeah, FL 33010

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 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

Data.

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