

**Electronic Articles of Incorporation
For**

P20000035734
FILED
May 11, 2020
Sec. Of State
dlokeefe

SOUTHWEST FLORIDA MOBILE THERAPY, 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:

SOUTHWEST FLORIDA MOBILE THERAPY, INC.

Article II

The principal place of business address:

6 CAYMAN CT
FORT MYERS, FL. 33912

The mailing address of the corporation is:

6 CAYMAN CT
FORT MYERS, FL. 33912

Article III

The purpose for which this corporation is organized is:

PHYSICAL/OCCUPATIONAL THERAPY SUPPORT

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:

SHAWN TROYER PTA LLC
6 CAYMEN CT
FORT MYERS, FL. 33912

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

Registered Agent Signature: SHAWN TROYER

Article VI

The name and address of the incorporator is:

SHAWN TROYER
6 CAYMAN CT

FORT MYERS, FL 33912

Electronic Signature of Incorporator: SHAWN TROYER

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: VP
SHAWN TROYER PTA LLC
6 CAYMAN
FORT MYERS, FL. 33912

Title: P
PANACEAS THERAPY CARE, LLC
1531 PLACIDA RD BUILD 6 UNIT 104
ENGLEWOOD, FL. 34223

Article VIII

The effective date for this corporation shall be:

05/11/2020