

**Electronic Articles of Incorporation
For**

**P24000023446
FILED
April 01, 2024
Sec. Of State
mkanderson**

LEECARE THERAPY CENTER CORP

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:

LEECARE THERAPY CENTER CORP

Article II

The principal place of business address:

220 S LAKE DR.
LEHIGH ACRES, FL. 33936

The mailing address of the corporation is:

220 S LAKE DR.
LEHIGH ACRES, FL. 33936

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:

NEILYN LABORI
220 S LAKE DR.
LEHIGH ACRES, FL. 33936

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

Registered Agent Signature: NEILYN LABORI

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Article VI

The name and address of the incorporator is:

NEILYN LABORI
220 S LAKE DR.

LEHIGH ACRES, FL 33936

Electronic Signature of Incorporator: NEILYN LABORI

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
NEILYN LABORI
220 S LAKE DR.
LEHIGH ACRES, FL. 33936

Article VIII

The effective date for this corporation shall be:

03/30/2024