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JOANNE M. HESS SPEECH PATHOLOGY, INC.
1689 SE SANDIA DRIVE.
PT. ST. LUCIE, FL 34983

JANUARY 1, 1995

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: JOANNE M. HESS SPEECH PATHOLOGY, INC.

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of $122.50.

This represents the cost of the filing fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

JOANNE M. HESS

JOANNE M. HESS SPEECH PATHOLOGY, INC.
1689 SE SANDIA DRIVE.
PT. ST. LUCIE, FL 34983

Enclosures

ARTICLES OF INCORPORATION

of

Joanne M. Hess Speech Pathology, Inc.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Joanne M. Hess Speech Pathology, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One Thousand shares (1,000) of One Dollar(s) ($ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	Joanne M. Hess		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	FLORIDA	ZIP 34983

The principal office, if known, or the mailing adress of the corporation is:

NAME	Joanne M. Hess Speech Pathology, Inc.		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	FLORIDA	ZIP 34983

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Joanne M. Hess		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	STATE FL	ZIP 34983
NAME	Stephen M. Hess		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	STATE FL	ZIP 34983
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Joanne M. Hess		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	STATE FL	ZIP 34983
NAME	Stephen M. Hess		
ADDRESS	1689 SE Sandia Dr.		
CITY	Pt. St. Lucie	STATE FL	ZIP 34983
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 1st day of January, 1995.

_____ (Seal)

_____ (Seal)

_____ (Seal)

STATE OF FLORIDA)
SS
COUNTY OF _____)

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

_____ _____
Signature Form of Identification

_____ _____
Signature Form of Identification

_____ _____
Signature Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ executed these Articles of Incorporation, that I relied upon the form__ of identification of the above named person__ as indicated opposite each name, and that an oath was not taken.

NOTARY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this .....day of.....19.....

_____
Notary Signature

_____
Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Joanne M. Hess Speech Pathology, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 1689 SE Sandia Dr.
Pt. St. Lucie, FL 34983

has named Joanne M. Hess
located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Joanne M. Hess
(registered agent)

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