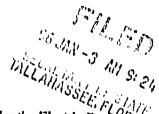
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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	E THERAPY SE	RVICES INC.	fix)					
Enclosed is an original for:	and one (1) co	py of the articles of	incorporation a	ind a check	•			
\$70.00 Filing Fen	\$78.75 Filling Fee & Cordficate	x \$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate					
		Additional Copy	Required					
FROM:	BRIAN MACH	(IE printed or typed)						
	1876 PATNO	PED BUNTING CIP	יייי ב					
1876 PAINTED BUNTING CIRCLE Address								
PALM HARBOR, FL. 34683								
	City	, State & Zip						
	813-784-2421			<u>-</u> -				
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NOTE: Please p	rovide the or	iginal and <u>one c</u>	opy of the a	<u> </u>	4			



ARTICLES OF INCORPORATION

ARTICLES OF INCORPORATION

All 9:24

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Businesson

Composition Act. baraba adopt(s) the following Articles of Incorporation Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> ARTICLEI NAME

The name of the corporation shall be:

MACKIE THERAPY SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

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

1876 PAINTED BUNTING CIRCLE PALM HARBOR, FL. 34683

> ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5,000

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

BRIAN MACKIE

1876 PAINTED BUNTING CIRCLE, PALM HARBOR FL. 34683

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

BRIAN MACKIE, PT FAYE NAMBA-MACKIE, PT

1876 PAINTED BUNTING CIRCLE PALM HARBOR, FL. 34683

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Dun Signature

Day Nowland asking

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1, 7	The name of the corporation is: MACKIE. THERAPY SERVICES INC	l		
2. 7	The name and address of the registered agent and office is:	 -		 ,
	BRIAN MACKIE (NAME)	TALLA	S S	*** <u>******</u>
	1876 PAINTED BUNTING CIRCLE (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	ASSEE.	25 - ム 音	1237mi 123718 U
	PALM KARBOR FL. 34683 (CITY/STATE/ZIP)		9:24	Land)
corp agei relai	ing been named as registered agent and to accept service of process for coration at the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the provisiing to the proper and complete performance of my duties, and I am familiar was actions of my position as registered agent.	nent as l	regis il! sta	stered
	(SIGNATURE) (DATE))		