

P96000002302
TRANSMITTAL LETTER

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

UNRECORDED
-01704796--01051--001
***122.50 ***122.50

SUBJECT: MACKIE THERAPY SERVICES INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: BRIAN MACKIE
Name (printed or typed)

1876 PAINTED BUNTING CIRCLE
Address

PALM HARBOR, FL. 34683
City, State & Zip

813-784-2421
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

56 JAN -3 AM 9:24

FILED

JAN 10 9 1986

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED
26 JAN -3 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I 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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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 1876 PAINTED BUNTING CIRCLE
FAYE NAMBA-MACKIE, PT PALM HARBOR, FL. 34683

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

30 day of December, 19 95.

Brian Mackie
Signature

Faye Namba Mackie
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. The name of the corporation is: MACKIE THERAPY SERVICES INC.

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

BRIAN MACKIE
(NAME)

1876 PAINTED BUNTING CIRCLE
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PALM HARBOR FL. 34683
(CITY/STATE/ZIP)

FILED
95 JAN -3 AM 9:24
TALLAHASSEE, FLORIDA

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)

12-30-95
(DATE)