

P96000024862

TRANSMITTAL LETTER

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

SUBJECT: TOTAL SPEECH CARE, INC
(Proposed corporate name - must include suffix)

400001745244
-03/15/96--01102--008
****131.25 ****131.25

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: LENNORIS E. ANNA J. ROSIER
Name (printed or typed)

8502 MICHAEL DR.
Address

BOYNTON BCH, FL 33437
City, State & Zip

407-736-8353
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
96 MAR 15 PM 2:34

3-20-96
JA

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

ARTICLES OF INCORPORATION

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:

TOTAL SPEECH CARE, INC

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

**8502 MICHAEL DR
BOYNTON BCH, FL 33437**

ARTICLE III SHARES

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

1,000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**LENNORIS E. & ANNA J. ROSIER
8502 MICHAEL DR
BOYNTON BCH, FL 33437**

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):

ANNA J. ROSIER - DIRECTOR
8502 MICHAEL DR
BOYNTON BCH, FL 33437

LENNORIS E. ROSIER - BUSINESS MANAGER
8502 MICHAEL DR.
BOYNTON BCH, FL 33437

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

11TH day of MARCH, 19 96.

Anna J. Rosier

Signature

L E Rosier

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:

TOTAL SPEECH CARE, INC

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

LENNORUS E. & ANNA J. ROSIER
(NAME)

8502 MICHAEL DR.
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

BOYNTON BCH, FL 33437
(CITY/STATE/ZIP)

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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.

LEPain / Anna J. Rosier
(SIGNATURE)

MARCH 11, 1996
(DATE)