

P96000062603

TRANSMITTAL LETTER

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

700001904717
-07/25/96--01094--012
****122.50 ****122.50

SUBJECT: ALACHUA REHABILITATION, 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:

LINDA E. WILLIAMS

Name (printed or typed)

P. O. BOX 549

Address

ALACHUA, FL 32616-0549

City, State & Zip

(904) 462-9005

Daytime Telephone number

FILED
JUL 25 11:05 AM '96
TALLAHASSEE, FLORIDA

Handwritten signature

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

July 2, 1998

LINDA WILLIAMS
NORTH FLORIDA REHABILITATION CENTER, INC
P O BOX 549
ALACHUA, FL 32615

The name **ALACHUA REHABILITATION, INCORPORATED** has been reserved for 120 days beginning July 2, 1998. The reservation number is R96000003225 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lanham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section

Marie Bartlett

Letter number: 796A00032480

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:

ALACHUA REHABILITATION, INC.

ARTICLE II PRINCIPAL OFFICE

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

P. C. BOX 549 CAKHILL PLAZA
14540 WEST MARTIN LUTHER KING BLVD.
ALACHUA, FL 32616-0549

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LINDA E. WILLIAMS
P. C. BOX 549 14540 WEST MARTIN LUTHER KING BLVD.
ALACHUA, FL 32616-0549

FILED
JAN 13 1983
ALACHUA COUNTY
FLORIDA

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):

PRESIDENT: LINDA E. WILLIAMS
RT. 10 BOX 163
LAKE CITY, FL 32025

VP/ST: GUY N. WILLIAMS
RT. 10 BOX 163
LAKE CITY, FL 32025

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

24th day of JULY, 19 96.

(An additional article must be added if an effective date is requested.)

Linda E. Williams
Signature

Guy N. Williams
Signature

Signature

Notarization is not required

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: ALACHUA REHABILITATION, INC.

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

LINDA E. WILLIAMS

(NAME)

14540 WEST MARTIN LUTHER KING BLVD. (HWY 441)

(P.O. Box or Mail Drop Box ~~NOT~~ ACCEPTABLE)

ALACHUA, FL 32616-0549

(CITY/STATE/ZIP)

FILED
95 JUL 25 AM 10:50
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.

Linda E. Williams
(SIGNATURE)

7/24/96
(DATE)

P96 000062603

8/15/96

Dear Sirs:

Please make a name change amendment
to our corporation, Alachua Rehabilitation, Inc.

The change should be made to:

TOTAL THERAPY, INC. + has been reserved
beginning Aug. 7th, 1996 & Reservation # is R96000003764.)
Check enclosed for \$35.00.

Thank you -

000001926418
-08/20/96--01081--010
***\$35.00 ***\$35.00

Linda Williams, Administrator

Rt. 10 Box 163

Lake City, FL 32025

(904) 752-1875

96 AUG 19 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NC
[Signature]
8/22

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

ALACHUA REHABILITATION, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (Indicate article number(s) being amended, added or deleted)

Amend article one to read:

The name of the corporation is TOTAL THERAPY, INC.

FILED
26 AUG 19 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows: N/A

THIRD: The date of each amendment's adoption: 8-15-96

FOURTH: Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____ voting group."

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 14th day of August, 19 96

Signature

Linda E. Williams

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Linda E. Williams

Typed or printed name

President

Title