

997000038950

TRANSMITTAL LETTER

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

SUBJECT: PROFESSIONAL THERAPIES OF GAINESVILLE, INC.
(Proposed corporate name - must include suffix)

300002160733--5
-04/30/97--01090--010
****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:

MARY CRIBB

Name (printed or typed)

4300 NW 23RD AVE #415

Address

GAINESVILLE, FL 32606

City, State & Zip

(352) 376-4642

Daytime Telephone number

FILED
97 APR 30 PM 12:16
STATE
TALLAHASSEE, FLORIDA

MAY 1 1997 BSB

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

ARTICLES OF INCORPORATION

FILED

97 APR 30 PM 12:16

SEC. 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:

Professional Therapies of Gainesville, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4300 NW 23RD AVE #415
Gainesville, Fl. 32606

ARTICLE III SHARES

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

one hundred shares of common voting
stock having a par value of \$1.00
per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mary H. Cribb
4300 N.W. 23RD AVE #415
Gainesville, Fl. 32606

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):

- 1.) President & Treasurer - Mary H. Cribb
4300 N.W. 23RD Ave. #415
Gainesville, FL 32606
- 2.) Vice President - Roy S. Cribb
4300 N.W. 23RD Ave. #415
Gainesville, FL 32606
- 3.) ROY S. CRIBB & MARY H. CRIBB ARE EQUAL OWNERS
- 4.) TOTAL 100 Shares @ PAR Value of \$1.00 Each.
- 5.) Therapeutic Services (Physical Therapy, Occupational Therapy & Speech)

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

29 day of April, 19 97.

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

Mary H. Cribb (President)
Signature
Roy S. Cribb (Vice-President)
Signature
Mary H. Cribb (Treasurer)
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: Professional Therapies of
Gainesville, Inc.

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

Mary H. Cribb
(NAME)
4300 N.W. 23RD Ave #415
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Gainesville, Fl. 32606
(CITY/STATE/ZIP)

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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.

Mary H. Cribb
(SIGNATURE)

4.29.97
(DATE)