

P97000094694

PROFESSIONAL THERAPY, INC.
P.O. Box 452063, Sunrise, Florida 33345

October 28, 1997

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

100002337131--2
-11/04/97--01019--001
(4) *****70.00 *****70.00

RE: INCORPORATION OF
PROFESSIONAL THERAPY, INC.

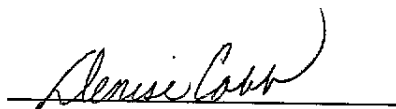
Dear Secretary of State:

Enclosed please find one original and a copy of the Articles of Corporation of **PROFESSIONAL THERAPY, INC.**

Also please find an Affidavit executed by Mr. James Conlin, the former Director of Professional Therapy, Inc. By way of the Affidavit, Mr. Conlin permits my company to use the corporate name of "Professional Therapy, Inc." in advance of the one-year waiting period normally prescribed for dissolved corporations.

Also enclosed is a check made payable to the Secretary of State in the amount of \$70.00 which includes the statutory filing fee. Your assistance in establishing this corporation is appreciated. If there are any questions, please do not hesitate to contact me.

Respectfully,


Denise Cobb

FILED
97 NOV -4 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/15/97

ARTICLES OF INCORPORATION
OF
PROFESSIONAL THERAPY, INC.

ARTICLE ONE

The name of the corporation is **PROFESSIONAL THERAPY, INC.** The principal address of the corporation is: P.O. Box 452063, Sunrise, Florida 33345.

ARTICLE TWO

The period of its duration is perpetual.

ARTICLE THREE

The purpose for which the corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under the Florida Corporation Act.

ARTICLE FOUR

The aggregate number of shares which the corporation shall have authority to issue is **one hundred (100) of no par value.**


ARTICLE FIVE

The corporation will not commence business until it has received for the issuance of shares consideration of the value of \$1,000.00 consisting of money, labor done or property actually received.

ARTICLE SIX

The street address of its initial registered office is 2903 29th Lane, Lake Worth, Florida 33463, and the name of its initial registered agent at such address is Denise Cobb.

I am hereby familiar with and accept the duties and responsibilities as registered agent for said corporation.



Denise Cobb

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE SEVEN

The number of directors constituting the initial board of directors is one (1), and the name and address of the person or persons who are to serve as directors until the first annual meeting of the shareholders or until their successors are elected and qualified are:

Name	Mailing Address
Denise Cobb	2903 29 th Lane, Lake Worth, Florida 33463

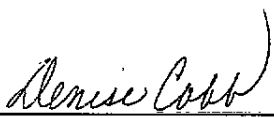
ARTICLE EIGHT

The Board of Directors is empowered to make, alter or repeal the Bylaws of the corporation without restriction of their powers conferred by statute.

ARTICLE NINE

The name and address of each incorporator is:

Name	Mailing Address
Denise Cobb	2903 29 th Lane, Lake Worth, Florida 33463



Denise Cobb, Incorporator

ARTICLE TEN

The powers of the incorporators cease upon filing of the Articles of Incorporation.

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97 NOV -4 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT GRANTING USE OF A CORPORATE NAME

James F. Conlin makes this Affidavit in Broward County, Florida, this 28th day of October, 1997, and states as follows:

1. I am the previous Director and President of Professional Therapy, Inc., which was filed on 1/23/96, assigned document reference number P96000006917, and dissolved on 9/26/97.

2. I hereby permit immediate and current use of the name "Professional Therapy, Inc." by Ms. Denise Cobb, her company, successors, and assignees.

FURTHER AFFIANT SAYETH NAUGHT.

By: _____

James F. Conlin, Director
10717 Cleary Boulevard, #112
Plantation, Florida 33324
(954) 405-2988

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me on October 28, 1997, by James F. Conlin.



NANCY D. WIENER
COMMISSION # CC629025
EXPIRES MAR 10, 2001
BONDED THROUGH
ATLANTIC BONDING CO., INC

NOTARY PUBLIC-STATE OF FLORIDA

NANCY WIENER
[Print, type, or stamp commissioned name of notary]

[☒ one only]

☐ Personally known

☒ Produced identification Type of identification produced

FL driver's license
CS45-446-50-0100

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TALLAHASSEE, FLORIDA
CLERK OF STATE