## 0046869 E Virginia St City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Certified Copy ☐ Walk in Photocopy Certificate of Status ☐ Mail out **₩** Will wait NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement -05/27/98 - -01002 --008 \*\*\*\*\*78.75 \*\*\*\*\*78.75 Trademark Other

Examiner's Initials

### ARTICLES OF INCORPORATION

OF

#### MEDICAL REHAB. PRODUCTS INC.

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

#### ARTICLE I NAME

The name of the corporation shall be:

MEDICAL REHAB. PRODUCTS INC.

ARTICLE II PRINCIPAL OFFICE

The mailing address of this corporation shall be:

200 Mamaroneck Avenue, White Plains, NY 10601



#### ARTICLE III CAPITAL STOCK

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

One Thousand (1,000) Shares Without Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

W. Bradley Munroe, Esquire

239 East Virginia Street Tallahassee, FL 32301

#### ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Robert Worthington

2021 Arch Street Philadelphia, PA 19103

The undersigned has executed these Articles of Incorporation this 22nd day of May, 1998.

Robert Worthington,

Incorporator

# CERTIFICATE OF DESIGNATION 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:

MEDICAL REHAB. PRODUCTS INC.

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

W. Bradley Munroe, Esquire

239 East Virginia Street Tallahassee, FL 32301

Signature

Robert Worthington

Title: Incorporator

Date: May 22, 1998

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.

V. Bradley Munkoe, Esquire

Date: May , 1998