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William Watson Trick, Jr. P.A.

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June 6, 1998

Florida Department of State
DIVISION OF CORPORATIONS
409 East Gaines Street
Tallahassee, Florida 32399

SUBJECT: **HYDROTHERAPY TECHNOLOGY, INC.**

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: William Watson Trick, Jr.

1216 E. Atlantic Blvd., Suite 7

Pompano Beach, Florida 33060

954-942-9774

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Encl. - check no. 8327

VIA FEDEX 800150129056

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUN -8 AM 11:01

FILED

TS
6/10

ARTICLES OF INCORPORATION

OF

HYDROTHERAPY TECHNOLOGY, INC.

ARTICLE 1: CORPORATE NAME: The name of this corporation is **HYDROTHERAPY TECHNOLOGY, INC.**

ARTICLE 2: PRINCIPAL OFFICE: The street address of the initial principal office of this corporation is 5295 NE 20th Avenue, Ft. Lauderdale, FL 33308.

ARTICLE 3: AUTHORIZED NUMBER OF SHARES: This corporation is authorized to issue one thousand shares (1,000) of common stock having no par value.

ARTICLE 4: INITIAL REGISTERED AGENT AND OFFICE: The street address of this corporation's initial registered office is 1216 E. Atlantic Blvd., Suite 7 Pompano Beach, Florida 33060. The name of the initial registered agent of this corporation at that address is William Watson Trick, Jr.

ARTICLE 5: INCORPORATOR: The name and address of the incorporator of this corporation is Torbjorn G. Lofgren, located at 5295 NE 20th Avenue, Ft. Lauderdale, FL 33308.

ARTICLE 6: INITIAL DIRECTOR: The name and address of the individual who is to serve as the initial director of this corporation is Torbjorn G. Lofgren, located at 5295 NE 20th Avenue, Ft. Lauderdale, FL 33308.



Torbjorn G. Lofgren, Incorporator

6/5/98

Date

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.



William Watson Trick, Jr.

6/5/98

Date

FILED
98 JUN -8 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA