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TRANSMITTAL LETTER

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

700002602757--6
-07/30/98-01062-006
****122.50 ****122.50

SUBJECT: Clare C. Leverette, P.A.
(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: Clare C. Leverette
Name (printed or typed)

4901 SW 201st Terrace
Address

Ft. Lauderdale, Florida 33332
City, State & Zip

954-434-6625
Daytime Telephone Number

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
98 JUL 30 PM 3:16

08/13/98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 4, 1998

CLARE C. LEVERETTE
4901 S.W. 201ST TERRACE
FT. LAUDERDALE, FL 33332

SUBJECT: CLARE C. LEVERETTE, P.A.
Ref. Number: W98000017621

We have received your document for CLARE C. LEVERETTE, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

The date of receipt is July 30, 1998.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Randall Purintun
Document Specialist

Letter Number: 598A00040641

*I am returning my application per
our conversation. Thank You,
Clare C. Leverette*

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

Clare C. Leverette, P.A.

ARTICLE II PRINCIPAL OFFICE

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

4901 SW 201st Terrace
Ft. Lauderdale, Florida 33332

ARTICLE III SHARES

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

One Hundred (100) shares of common stock with a par value of \$ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Clare C. Leverette
4901 SW 201st Terrace
Ft. Lauderdale, Florida 33332

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ARTICLE V INCORPORATOR(S)

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Clare C. Leverette
4901 SW 201st Terrace
Ft. Lauderdale, Florida 33332

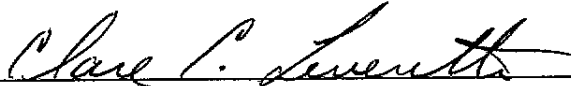
ARTICLE VI EFFECTIVE DATE

This corporation shall not become effective until July 15, 1998

ARTICLE VI PURPOSE

The specific nature of this professional association shall be Physical Therapy.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this Thirteenth Day of July, 1998



Signature

Signature

Signature

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 AGENT/REGISTERED OFFICE, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Clare C. Leverette, P.A.

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

Clare C. Leverette

(Name)

4901 SW 201st Terrace

(P.O. Box or Mail Drop Box **NOT** acceptable)

Ft. Lauderdale, Florida 33332

(City/State/Zip)

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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 proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Clare C. Leverette

(Signature)

7-15-98

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314