

P99000013369

TRANSMITTAL LETTER

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

700002767817--9  
-02/08/99--01108--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: The Center for Rehabilitative Arts, Inc.  
(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: Melvin E. Droszcz, Registered Agent  
Name (Printed or typed)

3242 NW 39th Street  
Address

Fort Lauderdale FL, 33309-4920  
City, State & Zip

(954) 485-3426  
Daytime Telephone number

FILED  
99 FEB -8 AM 8:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

B. BROCK FEB 11 1999

**ARTICLES OF INCORPORATION  
OF  
The Center for Rehabilitative Arts, Inc.**

**ARTICLE I - NAME**

The name of the corporation is **The Center for Rehabilitative Arts, Inc.**, (hereinafter called the Corporation)

**ARTICLE II - PURPOSE**

The Corporation is organized for the purpose of transacting any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act-

**ARTICLE III - CAPITAL STOCK**

The aggregate number of shares which the Corporation shall have the authority to issue is **10,000** shares of Common Stock.

**ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT**

The initial registered office and place of business of this corporation is located at 3242 NW 39<sup>th</sup> Street,  
Fort Lauderdale, FL 33309-4920

**ARTICLE V - INITIAL BOARD OF DIRECTORS**

The corporation shall have one (1) director initially. The number of directors may be either increased or decreased from time to time as provided in the By-Laws of the corporation, but shall never be less than one. The names and addresses of the initial directors of this corporation are-

Chris Evans  
97 Hendricks Isle  
Fort Lauderdale, FL 33301

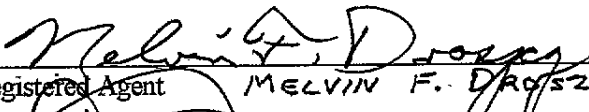
FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

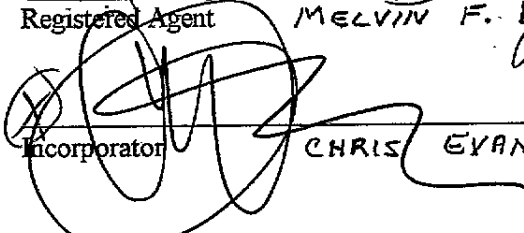
**ARTICLE VI - INCORPORATOR**

The names and addresses of the person signing these Articles of Incorporation is:

Chris Evans  
97 Hendricks Isle  
Fort Lauderdale, FL 3330

IN WITNESSETH WHEREOF, the undersigned incorporator and Registered Agent has executed these Articles of Incorporation this 1<sup>ST</sup> day of FEB, 1998

  
\_\_\_\_\_  
Registered Agent MELVIN F. DROZDZ

  
\_\_\_\_\_  
Incorporator CHRIS EVANS

**CERTIFICATE DESIGNATING THE ADDRESS  
AND AN AGENT UPON WHOM PROCESS MAY BE SERVED**

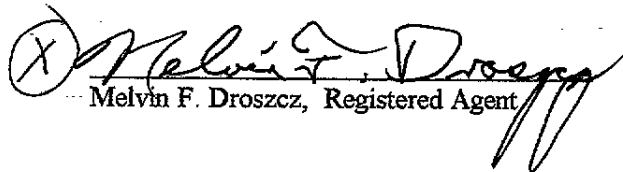
WITNESSETH

That **The Center for Rehabilitative Arts, Inc.**, desiring to organize under the laws of the State of Florida, which will have its principal office in Florida and has named **Melvin F. Droszcz**, located at 3242 NW 39<sup>th</sup> Street, Fort Lauderdale, Florida 33309, as its agent to accept service of process within this state.

**ACKNOWLEDGMENT:**

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I accept the duties and obligations of Section 607.325, Florida Statutes-

Dated this 1 day of FEB, 1998

  
Melvin F. Droszcz, Registered Agent

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