

P99000017218

Patrice Freeman
13232 SW 42nd St.
Davie, FL 33330

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #) 500002780575--8
-02/19/99--01042--015
2. _____
(Corporation Name) (Document #) ****122.50 *****78.75
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

FILED
99 FEB 19 AM 11:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION
OF
A FLORIDA CORPORATION**

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I CORPORATE NAME

The name of this corporation shall be

Sensory Plus, Inc.

a Florida Corporation.

ARTICLE II NATURE OF CORPORATE BUSINESS

To engage in the rendering of occupational therapy services to further carry on any and all business authorized by the laws governing the State of Florida.

ARTICLE III CAPITAL STOCK

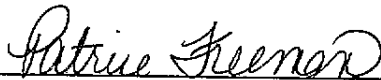
This corporation is authorized to issue 1000 shares at \$.10 per share par value.

ARTICLE IV INITIAL REGISTERED AGENT

The corporation's initial registered agent in the State of Florida shall be:

Patrice Freeman

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



ARTICLE V CORPORATION'S PRINCIPAL OFFICE AND MAILING ADDRESS

13232 S.W. 42nd Street
Davie, FL 33330

ARTICLE VI CORPORATION'S REGISTERED OFFICE ADDRESS

13232 S.W. 42nd Street
Davie, FL 33330

ARTICLE VII BOARD OF DIRECTORS

The number of Directors for this corporation shall be no less than one and no more than six.

ARTICLE VIII INITIAL DIRECTORS

The names and post office addresses of each member of the first Board of Directors are:

Patrice Freeman
13232 S.W. 42nd Street
Davie, FL 33330

ARTICLE IX INCORPORATORS

The names and post office addressed of each incorporator executing these Articles of Incorporation are:

Patrice Freeman
13232 S.W. 42nd Street
Davie, FL 33330

ARTICLE X VOTING RIGHTS

Except as otherwise provided by law, the entire voting power for the election of Directors and for all other purposes shall be vested exclusively in the holders of outstanding common shares.

ARTICLE XI BY-LAWS

The power to adopt, alter, amend, or repeal by-laws shall be vested in the Board of Directors and Shareholders.

ARTICLE XII APPROVAL OF SHAREHOLDERS

The approval of Shareholders of this Corporation to any plan of merger shall be required in every case, whether or not such approval is required by law.

ARTICLE XIII POWERS

This Corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE XIV INDEMNIFICATION

The Corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

ARTICLE XV AMENDMENT

The Corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment thereto and any right conferred upon the shareholders is subject to this reservation.

That I, the undersigned incorporator for the purpose of forming a corporation to do business within the State of Florida, do hereby make and file these Articles of Incorporation, declaring and certifying that the facts stated herein are true and correct.

Patrice Freeman
Patrice Freeman

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99 FEB 19 AM 11:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF FLORIDA

SS.

COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared:

Patrice Freeman

Who, upon being duly sworn upon oath, acknowledged to and before me that they executed the foregoing Articles of Incorporation for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, in the state and county aforesaid, this 15th day of Feb., 19 99.

Sam Nehme

NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

My commission expires:

