# P9900054540

Date / 6 /8 /99

Secretary of State Division of Corpora cons P.O. Box 6327 Tallahassee, Fl. 32214

400002904064--5 -06/14/99--01134--011 \*\*\*\*122.50 \*\*\*\*\*\*78.75

Re flt. sleid la Thologists, Inc.

#### Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, certified copy of articles of Incorporation and Fee for Registered agent Designation for the above pamed comporation.

Very truly yours,

FLA SPEECH PATHOLOGIST	TINC,	_
5/20 5W 87 NE	SECKE SECKE	124
PT. LANG, Ph. 333328	A A	
(974) 434 0001	8: 38	

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INC.

# ARTICLES OF INCORPORATION OF

PlA. SPERCH PATHOLOGIST, INC.

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

### ARTICLE I - CORPORATE NAME

THE	manie o	r rue corbo	ration is:	-
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i	PUTT	SPERCH	PATHOLOGIST, IM.	
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#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

# ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE HUNDER shares (100) of ONE Dollar(s) (\$ 1,00 ) par value Common Stock, which shall be designated "Common Shares".

# ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME: PLA. SPERIH P.	ATHOLOGIST, INC.
ADDRESS: 5720 5/1 87	AVR.
CITY: PT. LAUD	FLORIDA MZIP 3338

The name and street address of the Initial Registered Agent of this Corporation is:	
NAME: DENISE ZA RETSKI	. <del>=</del>
ADDRESS: 5/20 SW 3) AVE	
CITY: M. LAYD FLORIDA ZIP 33328	
ARTICLE VI - INITIAL BOARD OF DIRECTORS	
This corporation shall have ONE (./ ) directors initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). the names and addresses of the initial director(s) of the corporation are as follows;	
NAME: DENISE ZARETSK: PRES/SELTRE	ζ
ADDRESS 5720 SW 87 AVE.	.t . <del></del>
CITY PT LAYO. FLORIDA ZIP 33338	
NAME:	
ADDRESS	
CITYFLORIDAZIP	
NAME:	<del></del>
ADDRESS:	-a *
CITY:FLORIDA ZIP	

# ARTICLE VII - INCORPORATORS

The names and address of the incorporators signing theses Articles of Incorporation are as follows:	
NAME: DENISE ZARETSKI	
ADDRESS: 5720 SW 87 AVE	
CITY: F, LAND FLORIDA ZIP 37378	<u></u>
NAME:	
ADDRESS:	
CITY:FLORIDAZIP	
NAME:	- 1
ADDRESS:	
CITY:FLORIDAZIP	- ــــــــــــــــــــــــــــــــــــ
IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this day of June 1995.	

#### STATE OF FLORIDA

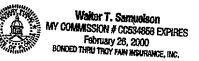
COUNTY	OF_	Blow	HRD)		·		-	 
before acknowl persona	me , Ledge	a Not	ary Pub in the	Tio S	nt hor	decad to	1 <sub>-</sub>	 

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_\_\_\_executed these Articles of Incorporation.

IN WITNESS WHEREOF, B I have hereunto affixed my hand and seal, in the State and County aforesaid, this day of Tune, 1975.

Notary Public, State of Florida

My commission expires:



CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

PA - SPEASH STANDS/JNZ, (name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 5720 SW 37 AMO

has named NEWISE ZARETSKi

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

registered agent

99 JUN 14 AM 8: 38
SECKETARY OF STATE