

TRANSMITTAL LETTER

P99000055433

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

Atlantic Health and Rehab

SUBJECT: The Physical Rehab Institute, Inc.  
(Proposed corporate name - must include suffix)

300002893913--7  
-06/03/99--01048--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: MARVIN J. Merritt  
Name (Printed or typed)

2722 W. Atlantic Blvd Suite #1  
Address

Panama Beach, FL 33069  
City, State & Zip

954-968-4144  
Daytime Telephone number

99 JUN -3 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

B. BROCK JUN 18 1999

P99000013343  
02544



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 8, 1999

MARVIN J. MERRIT  
2722 W. ATLANTIC BLVD., SUITE #15  
POMPANO BEACH, FL 33069

SUBJECT: THE PHYSICAL REHAB INSTITUTE, INC.  
Ref. Number: W99000013343

We have received your document for THE PHYSICAL REHAB INSTITUTE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6925.

Barbara Brock  
Document Specialist

Letter Number: 599A00031010

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

Atlantic Health and Rehab, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

2722 W. Atlantic Blvd. Suite #15  
Pompano Beach, FL 33069

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Dr. MARVIN J. Meritt  
2722 W. Atlantic Blvd. Suite #15  
Pompano Beach, Florida 33069

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Dr. Marvin J. Meritt  
2722 W. Atlantic Blvd. #15  
Pompano Beach, Florida 33069

  
Signature/Incorporator

6/1/99  
Date

(An additional article must be added if an effective date is requested.)

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

  
Signature/Registered Agent

6/1/99  
Date

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 JUN -3 AM 10:18

FILED