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FILED

99 JUN 30 PM 6:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

28 June 1999

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

EFFECTIVE DATE

6-28-99

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-06/30/99--01085--011

*****87.50 *****87.50

SUBJECT: PANHANDLE PHYSICAL MEDICINE AND REHABILITATIVE
SERVICES, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:
\$87.50 for filing fee, certified copy and certificate of status.

FROM: GARY L. JENNINGS
2539 EASTGATE DRIVE
MARIANNA, FL 32446
Tel. No. (850)482-6518

EFFECTIVE DATE
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ARTICLES OF INCORPORATION

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The undersigned incorporators, 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:

PANHANDLE PHYSICAL MEDICINE AND REHABILITATIVE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

2539 EASTGATE DRIVE
MARIANNA, FL 32446

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

GARY L. JENNINGS
2539 EASTGATE DRIVE
MARIANNA, FL 32446

ARTICLE V INCORPORATORS

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

GARY L. JENNINGS AND ELENITA Y. JENNINGS
2539 EASTGATE DRIVE
MARIANNA, FL 32446

Gary Jennings
Signature, Incorporator

EY Jennings
Signature, Incorporator

June 28, 1999
Date

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ARTICLE VI EFFECTIVE DATE

The effective date of this corporation shall be: JUNE 28, 1999.

Having been named as a 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

June 28, 1999

Date