

TRANSMITTAL LETTER

*P9902262857*

**COPY**  
FILED

99 JUL 14 AM 9:42

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT:

*Associates in Therapeutics, Inc.*

(Proposed corporate name - must include suffix)

100002921021--7

-07/01/99--01066--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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

*Arden O. Carrifliths*  
Name (Printed or typed)

*5075 NW 36 ST Suite D119*  
Address

*Auderdate Lakes, FL 33319*  
City, State & Zip

*(954) 731-8457*  
Daytime Telephone number

*WGS-15635*  
*PH 7/15/99*

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



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 8, 1999

ARDEN GRIFFITH  
5075 NW 36TH ST, SUITE D119  
LAUDERDALE LAKES, FL 33319

SUBJECT: ASSOCIATES IN THERAPEUTIC, INC.  
Ref. Number: W99000015655

We have received your document for ASSOCIATES IN THERAPEUTIC, 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):

Your document is missing the first page of your Articles of Incorporation.

If you have any further questions concerning your document, please call (850) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 099A00035352

## ARTICLES OF INCORPORATION

FILED

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

99 JUL 14 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be: ASSOCIATES IN THERAPEUTIC, INC

### ARTICLE II PRINCIPAL OFFICE

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

5075 NW 36TH ST, D119 , LAUDERDALE LAKES, FLORIDA 33319

DURATION: THIS CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

PURPOSE: THIS CORPORATION IS ORGANIZED TO TRANSACT ANY LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA GENERAL CORPORATIONS ACT AND FOR THE PURPOSE OF MANUFACTURING, PURCHASING OR OTHERWISE ACQUIRING, AND TO OWN, MORTGAGE, SELL, ASSIGN, TRANSFER OR OTHERWISE DISPOSE OF, AND TO INVEST IN, TRADE IN, DEAL IN AND WITH GOODS, MERCHANDISE, REAL AND PERSONAL PROPERTY AND SERVICES OF EVERY CLASS, KIND AND DESCRIPTION; AND TO CARRY ON ANY BUSINESS WHICH CAN BE ADVANTAGEOUSLY PURSUED IN CONJUNCTION WITH OR INCIDENTAL TO ANY OF THE ABOVE PURPOSES.

SHARES: THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS : ONE HUNDRED (100) AT TEN DOLLARS (\$10.00) PAR VALUE COMMON STOCK.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ARDEN O. GRIFFITHS  
5075 NW 36TH ST, SUITE D119  
LAUDERDALE LAKES  
FLORIDA 33319

ARTICLE INCORPORATOR(S)]

**The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):**

**Arden O. Griffiths, and Joan Griffiths 5075 NW 36th Street, Suite #D119, Lauderdale Lakes, FL 33319.**

**The name of this corporation is ASSOCIATES IN THERAPEUTIC, INC.**

**The corporation shall have perpetual existence.**

The corporation is organized to transact any lawful business for which corporations may be incorporated under the Florida General Corporations Act and for the purpose of manufacturing, purchasing or otherwise acquiring, and to own, mortgage, sell, assign, transfer or otherwise dispose of, and to invest in, trade in, deal in, and with goods, merchandise, real and personal property and services of every class, kind and description, and to carry on any business which can be advantageously pursued in conjunction with or incidental to any of the above purposes. The number of shares and stock that this corporation is authorized to have outstanding at any time is One Hundred (100) at Ten dollars par value common stock.

**The undersigned incorporator(s) has(have) executed these Articles of Incorporation this**

30th day of April, 19 99.

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

Aden  
Signature

Joan  
Signature

Signature

**Notarization is not required**

**Note: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ARDEN GRIFFITHS. LMT  
5075 NW 36TH ST, SUITE D119  
LAUDERDALE LAKES, FL 33319

JOAN GRIFFITHS  
5075 NW 36TH ST, SUITE D119  
LAUDERDALE LAKES, FL 33319

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30TH day of APRIL, 19 99.

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

Arden Griffiths  
Signature

Joan Griffiths  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is ASSOCIATES IN THERAPEUTIC, INC

2. The name and address of the registered agent and office is:

ARDEN D. GRIFFITHS

(NAME)

5075 NW 36 TH ST, SUITE D119

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

LAUDERDALE LAKES, FL 33319

(CITY/STATE/ZIP)

*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.*

Arden Griffiths  
(SIGNATURE)

April 30, 1999  
(DATE)