

TRANSMITTAL LETTER

P99000090243

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

200003009462--5
-10/08/99--01017--015
*****78.75 *****78.75

SUBJECT: West Central Rehabilitation, Inc.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 OCT -8 PM 12:10

FILED

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: EDWIN G. GUILFORD
Name (Printed or typed)

P.O. Box 12672
Address

St. Petersburg, Florida 33733-2672
City, State & Zip

727-403-9300
Daytime Telephone number

RECEIVED OCT 13 1999

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

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: West Central Rehabilitation Incorporated

ARTICLE II PRINCIPAL OFFICE

P.O. Box 12672

St. Petersburg, Florida 33733-2672

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: one million (1,000,000) shares with no par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

Edwin G. Guilford

P.O. Box 12672

619^{29th} STREET SOUTH -33712

St. Petersburg, Florida 33733-2672

ARTICLE V INCORPORATORS

The names and addresses of the incorporators to these Articles of Incorporation are:

Edwin G. Guilford

P.O. Box 12672

St. Petersburg, Florida 33733-2672

Margie Creswell

6831 Marta

Houston, Texas 77083

Victoria Green

4122 Sandydale Lane

Houston, Texas 77039


Signature/Incorporator

10/4/99
Date


Signature/Incorporator

10/4/99
Date


Signature/Incorporator

10-4-99
Date

Having been named as registered and to accept service of process for the above stated corporation at the place designated in this certification, 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

10/4/99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 OCT -8 PM 12:10

FILED