

TRANSMITTAL LETTER

P99000108187

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

SUBJECT: INJURY REHABILITATION TREATMENT CENTERS AA
(Proposed corporate name - must include suffix)

500003051465--2
-11/22/93-01116-019
*****70.00 *****70.00

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: MICHAEL MASTERMAN
Name (Printed or typed)

7026 CHARLESTON SHORES BLVD
Address

LAKE WORTH FLORIDA 33467
City, State & Zip

561-432-6021
Daytime Telephone number

FILED
1993 NOV 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. Howell DEC 15 1999

Corrections
Notice was
sent for
additional article



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 30, 1999

MICHAEL MASTERMAN
7026 CHARLESTON SHORES BLVD.
LAKE WORTH, FL 33467

SUBJECT: INJURY REHABILITATION TREATMENT CENTERS PA
Ref. Number: W99000027193

We have received your document for INJURY REHABILITATION TREATMENT CENTERS PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

The specific nature of business of the professional association must be stated in the document.

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.

Angela Howell
Document Specialist

Letter Number: 399A00056502

FILED

1999 NOV 22 AM 11:00

ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

INJURY REHABILITATION TREATMENT
CENTERS PA

ARTICLE II PRINCIPAL OFFICE

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

7026 CHARLESTON SHORES BLVD
LAKE WORTH, FLORIDA 33467

ARTICLE III SHARES

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

20

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MICHAEL MASTERMAN
7026 CHARLESTON SHORES BLVD
LAKE WORTH, FLORIDA 33467

ARTICLE V INCORPORATOR

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

MICHAEL MASTERMAN
7026 CHARLESTON SHORES BLVD
LAKE WORTH, FLORIDA 33467



Signature/Incorporator

11/16/99

Date

ARTICLE VI PURPOSE

The purpose of this corporation is to perform chiropractor services.

(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

11/16/99

Date