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Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION

ALL CARE & REHAB CENTER, INC.

Certificate of Status	0
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ALL CARE & REHAB CENTER, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

6741 SW 24TH ST  
SUITE 40  
MIAMI, FL 33155

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

MARIA T. ESTRADA - PRESIDENT  
6741 SW 24TH ST - SUITE 40 - MIAMI, FL 33155

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

YANDRIK GONZALO  
6741 SW 24TH ST  
SUITE 40  
MIAMI, FL 33155

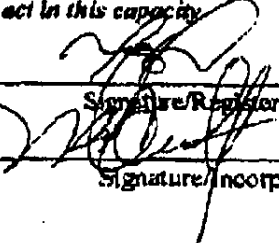
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

MARIA T. ESTRADA  
6741 SW 24TH ST - SUITE 40 - MIAMI, FL 33155

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\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

  
\_\_\_\_\_  
Signature/Registered Agent  
\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
JULY 06, 2009  
Date  
\_\_\_\_\_  
JULY 06, 2009  
Date