P97000010646



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97 JAN 27 PH 2: 17

ACCOUNT NO.: 032 + 8 RPORTATION

REFERENCE: 236776 132583A

AUTHORIZATION :

COST LIMIT : \$ 70.00

00

ORDER DATE: January 25, 1997

ORDER TIME : 12:37 PM

ORDER NO. : 236776-005

800002069278--8

CUSTOMER NO: 132583A

. 1525051.

CUSTOMER: Dr. Barry Warren DR. BARRY WARREN

4332 Forrest Hill Boulevard

W. Palm Beach, FL 33406

DOMESTIC FILING

HEALTH

NAME: 187 REHAB PLUS, INC.

(ALL'AII)

FILE

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

KX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

EXAMINER'S INITIALS:

N97-2066 KR 1.28 2-3-97



January 28, 1997

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301-2607

SUBJECT: 1ST REHAB PLUS, INC. Ref. Number: W97000002066

RESUBMIT

Please give original submission date as file date.

We have received your document for 1ST REHAB PLUS, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return 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 (904) 487-6932.

Kimberly Rolfe Document Specialist

Letter Number: 097A00004347



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

January 29, 1997

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301-2607

SUBJECT: REHAB PLUS, INC. Ref. Number: W9700002066

RESUBMIT

Please give original submission date as file date.

We have received your document for REHAB PLUS, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

f you have any questions.

Please return your document, along with a copy of this letter, with your filling will be considered abandoned.

If you have any questions concerning the filling of your document, please call (904) 487-6932.

Letter Number: 897A00004685

ARTICLES OF INCORPORATION

OF

HEALTH REHAB PLUS, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

HEALTH REHAB PLUS, INC.

The address of the principal office of this corporation shall be 4332 Forrest Hill Boulevard, West Palm Beach, Florida 33406, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having no par value per share.

AFOR SALARIAN SS

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The name and address of the initial member of the Board of Directors are:

Barry Warren Dir.

11260 Northwest 10th Manor Coral Springs, Florida 33071

ARTICLE VII. INCORPORATOR

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

Corporate Agents, Inc. 1201 Hays Street Tallahassee, Florida 32301

The undersigned incorporator has executed these Articles of Incorporation on January 27, 1997.

It's Agent, Deboral D. Skipper
Incorporator

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: Websit D. Skipper
It's Agent, Deborah D. Skipper
Authorized Service Representative
Corporation Service Company

ADM/VICTORIA L. PEREZ

97 JAN 27 PH 3: 55