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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FILED
03 JAN 17 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.
SUNSET MEDICAL & REHABILITATION CENTER, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION OF

SUNSET MEDICAL & REHABILITATION CENTER, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of the Corporation shall be:

SUNSET MEDICAL & REHABILITATION CENTER, INC.

ARTICLE II

This Corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

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

ARTICLE IV

The aggregate number of shares, which this corporation shall have authority to issue, is the total of 500 shares, having an individual par value of \$1.00 each, and shall be only Common class of stock on this corporation.

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TALLAHASSEE, FLORIDA

A R T I C L E V

The name and address of the initial registered agent, registered office, and principal office of this corporation shall be:

PEDRO DIAZ
9995-99 SUNSET DR SUITE 202
MIAMI, FLORIDA 33173

A R T I C L E VI

The initial Board of Directors shall consist of a total of two persons and the name of the persons who are to serve as initial director are:

PEDRO DIAZ

PRESIDENT/TREASURER

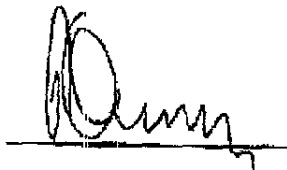
RODOLFO AGUILA

VICE-PRESIDENT/SECRETARY

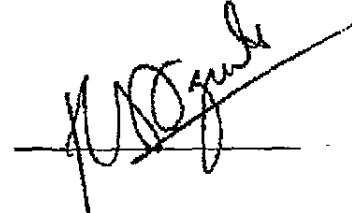
A R T I C L E VII

The name and address of the incorporators executing these Articles of Incorporation are:

PEDRO DIAZ
9231 SW 148TH STREET
MIAMI, FL 33176



RODOLFO AGUILA
5219 SW 149TH PL
MIAMI, FL 33185



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In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That SUNSET MEDICAL & REHABILITATION CENTER, INC.
(Name of Corporation)

Desiring to organize under the laws of the State of Florida with
its principal office, as indicated in the Articles of Incorporation
At the City of MIAMI County of MIAMI-DADE
State of Florida has named PEDRO DIAZ
(Name of Register Agent)

Located at 9995-99 SUNSET DR #202
(Street address and number of building,
Post Office Box address not acceptable)


City MIAMI, County of MIAMI-DADE

State of Florida, as its agent to accept service of process within
This state.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By: _____


PEDRO DIAZ
Register Agent

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