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CT CORPORATION SYSTEM

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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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FOREIGN PROFIT QUALIFICATION

OP Therapy, Inc. d/b/a OP PHC Therapy Company

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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DIVISION OF CORPORATIONS
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 OCT -4 AM 8:07 2005 OCT -4 A 10:08

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. OP Therapy, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

OP PBC Therapy Company

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Michigan

(State or country under the law of which it is incorporated)

3. 27-0028108

(FEI number, if applicable)

4. August 22, 2002

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon approval of this application

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

c/o Corporate Secretary, Tandem Health Care,

7. One Oxford Centre, 20th Floor, 301 Grant Street

(Principal office address)

Pittsburgh, PA 15219

(Current mailing address)

8. mobile medical diagnostic services and rehabilitation services

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CT Corporation System

By: James M. Newsome

(Registered agent's signature)

JAMES M. NEWSOME
Special Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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A. DIRECTORSChairman: Lawrence R. DeeringAddress: 800 Concourse Parkway S., Suite 200Maitland, FL 32751Vice Chairman: N/A

Address: _____

Director: Lawrence R. DeeringAddress: 800 Concourse Parkway, S., Suite 200Maitland, FL 32751

Director: _____

Address: _____

B. OFFICERSPresident: Joseph D. ConteAddress: 800 Concourse Parkway, S., Suite 200Maitland, FL 32751Vice President: N/A

Address: _____

Secretary: Rosemary L. CorsettiAddress: One Oxford Centre, 20th Floor, 301 Grant Street, Pittsburgh, PA 15219Treasurer: Eugene R. CurcioAddress: 800 Concourse Parkway, S., Suite 200, Maitland, FL 32751

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

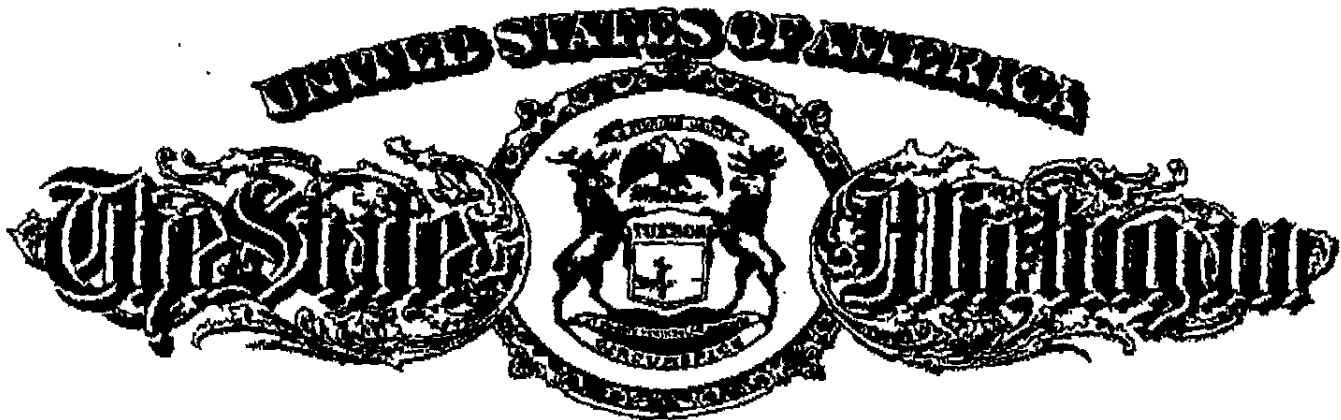
13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Rosemary L. Corsetti, Secretary

(Typed or printed name and capacity of person signing application)

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This is to Certify That

OP THERAPY, INC.

was validly incorporated on August 22, 2002, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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TALLAHASSEE, FLORIDA

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In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 29th day of September, 2005.

 , Director

Bureau of Commercial Services