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Division of Corporations

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From

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

FOREIGN PROFIT QUALIFICATION

Kessler Rehab Centers, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,220.00

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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.

i. Kessier Rehab	Centers, Inc.	}		
(Enter name of c	corporation; must include "INCORPORAT larp," "Inc," "Co," or "Corp.")	ED," "COMP	NY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate n	ame adopted for	the purpose of transacting busing	ness in Florida)
2. Delaware		3. 04-317770		·
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
4. 12/17/92		5 perpetual		
(Date of incorporation)		(Duration:	Year corp. will cease to exist	or "perpettial")
6, 1/01/04		{		
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60			
7. 4716 Old Gettys	burg Road, Mechanicsburg, PA 17055	- 12		
	(Principal office	address)		
4716 Old Gestysh	ourg Road, Mechanicsburg, PA 17055			
	(Current mailing	address)		
n To serve as the s	sole member of Argosy Health, LLC	}	•	,
(Purpose(s	of corporation authorized in home state :	or country to be	carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent:	(P.O. Box <u>N</u> Q	Tacceptable)	05 SEC TALI
Name:	C T Corporation System			≥≈ 吕
Office Address:	1200 South Pine Island Road			FILED DEC 27 AM 10: RETAIN DESTA AHASSEE, FLOI
	Plantation	, Flor	ida 33324	
	(City)	• \$-	(Zip code)	
Having been nam designated in this	gent's screptance; sed as registered agent and to accept s application, I hereby accept the appo	intment as reg	istered agent and agree to w	oration at the place ct in this capacity. I
further agree to c	omply with the provisions of all statut with and accept the obligations of my	es rélative to ti	he proper and complete perf	ormance of my duties,
	C T Corps	ration System	{	
<u> 18</u>	y: Ornic Anjan (Registered agent's signat			
	(Registéred agent's signat	nie)		,

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.

FLUIS - SAIRAS CT \$yesen Online

Insirman; Please see attached list.	_	
Address:		
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rice Chairman:	√	
firector:		
. OFFICERS		
resident: Please see attached list.	·	
ddress:		
		<u> </u>
ice President:		
dáress:	9	HAZ C 2
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ddress:		
,	h an addendum to the application listing additi	
3. Signature of	Director or Officer listed in number 12 of the	amilication)
John F. Duggan, Vice President &		and the company
Transd or m	rinted name and capacity of person signing ap	rlicotion)

Kessler Rehab Centers, Inc.

OFFICERS/DIRECTORS

Exhibit B

Rocco A. Ortenzio	Sole Director, Chairman & CEO	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Robert A. Ortenzio	President .	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Michael E. Tarvin	Vice President and Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Scatt A. Romberger	Vice President, Treasurer and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Kenneth L. Moore	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Martin F. Jackson	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Patricla A. Rice	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Daniel F. Bradley	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Joel T. Veit	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
John F. Duggan	Vice President and Assistant Secretary	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Donald J. Kaercher	Vice President	4716 Old Gettysburg Road Mechanicsburg, PA 17055
Mark S. Moore	Vice President	4716 Old Gettysburg Road Mechanicsburg, PA 17055

Select Medical Corporation, 4720 Old Gettysburg Road, Mechanicsburg, PA 17055 Phone 717-972-1139 Fax 717-975-9981 4 4 2 4



PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RESSLER REHAB CENTERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Warriet Smith Windson. Secretary of Scate

AUTHENTICATION: 4402261

DATE: 12-23-05

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