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DEBAUM FINASCIAL SERVICES		
АШТН	COUNT NO. : 072100000032 REFERENCE : 834183 6475A ORIZATION : Taliacia Pyrio OST LIMIT : \$ 122.50	FILED SECRETARY OF STA
ORDER DATE : F	ebruary 6, 1996	10A 29
ORDER TIME : 10	0:08 AM	
ORDER NO. : 83	34183	900001708259
CUSTOMER NO:	6475A	
MANKU P. O.	A. Coel, Esq NSON DINER STONE & JTA, P.A. Drawer 2088 wood, FL 33022-2088 DOMESTIC FILING	FREE BOOK FEB
NAME:	COMPREHENSIVE REHABILITATION, INC.	RECEIVED 96 FB -6 JULE 14 Wision of Corporation
XX ARTICLES O CERTIFICAT	F INCORPORATION E OF LIMITED PARTNERSHIP	1011 14
PLEASE RETURN TH	E FOLLOWING AS PROOF OF FILING:	
	D COPY AMPED COPY ATE OF GOOD STANDING	.1
CONTACT PERSON:	MJP EXAMINER'S INITIALS	== 3/6/96

ARTICLES OF INCORPORATION FILED of comprehensive rehabilitation, ing6 FEB -6 FN 4:29 (a corporation not for profit) SECRETARY OF STATE TALLAMASSEE, FLORIDA

ARTICLE I

CORPORATE NAME

The name of the corporation shall be: COMPREHENSIVE REHABILITATION, INC.

ARTICLE II

PURPOSE

The purpose of the corporation is to own and operate a certified comprehensive outpatient rehabilitation Medicare facility.

ARTICLE III

MEMBERS AND DIRECTORS

The qualification of members and directors and the manner of their admission shall be determined under and pursuant to the bylaws of this corporation.

ARTICLE IV

INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The corporation's initial registered agent and registered office in the State of Florida shall be:

> Mark A. Coel, Esq. Atkinson, Diner, Stone & Mankuta, P.A. 1946 Tyler Street Hollywood, FL 33020

ARTICLE V

MAILING ADDRESS

The initial mailing address of the corporation shall be:

Kings Point Professional Building 15127 Carter Road, Suite 106 Dolray Boach, FL 33446

ARTICLE VI

DIRECTORS

This corporation shall have that number of directors as set forth in the corporation's bylaws; provided, however, in no event shall such number be less than three (3).

ARTICLE VII

BYLAWS

The bylaws of the corporation shall initially be adopted by its directors, and shall thereafter be adopted, amended or repealed by its directors or its members under and pursuant thereto.

ARTICLE VIII

INCORPORATOR

The names and post office addresses of the Incorporators executing these Articles of Incorporation are:

George Luck, M.D. c/o Boca Raton Community Hospital Pain Management Department 800 Meadows Road Boca Raton, FL 33486 Bruco Berenson, M.D. 7431 Wost Atlantic Avenue Delray Beach, FL 33446

Robert Mollman, M.D. 5210 Linton Boulevard Delray Beach, FL 33484

The undersigned Incorporators, for the purpose of forming a corporation not for profit under the laws of the State of Florida, do make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.

George Luck, M.D.

Bruce Berenson, M.D

Robert Meliman, M.D.

CERTIFICATE DESIGNATING PLACE OF DUSINESS OR DONICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Sections 48.091 and 617.0501, Florida Statutes, Comprehensive Rehabilitation, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 15127 Carter Road, Suite 106, Delray Beach, State of Florida, has named MARK A. COEL, ESQUIRE, located at 1946 Tyler Street, City of Hollywood, State of Florida, as its agent to accept service of process within the State of Florida.

hy/
George Luck, M.D. Incorporator
DATE: //3//5 ⁽
, .
DATE:
SIGNATURE: Bruce Berenson, M.D. Incorporator
DATE: 1-31-96
SIGNATURE: Tales 1 Mollow Robert Mellman, M.D. Incorporator
DATE: 3-9-96

Having been named to accept service of process for the above-stated corporation, at the place designated in this Cortificate, I hereby acknowledge that I am familiar with the obligations of such position and agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my-duties.

SIGNATURE+

MARK A. COEL Registered Agent

DATE: 2 5 96

FILED

96 FEB -6 FM 4: 29

SECRETARY OF STATE

N960000000000000099

a Florida professional association

Mark A. Coel, J.D., LLM.



September 2, 1997

Presidential Circle 4000 Hollywood Blyd, Suite 350, North Tower Hollywood, FL 33021 Tel. (954) 893-1770 Fax (954) 893-1771

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314 800002265508--6 -09/05/97--01054--007 *****35.00 *****35.00

Re: Change of Registered Agent Office

To Whom It May Concern:

Enclosed is a Change of Registered Agent Office for Comprehensive Rehabilitation, Inc. Also enclosed is an additional copy of same to be file stamped and returned to me.

Please call me directly at (954)893-1770 with any questions.

Thank you for your assistance.

Sincerely,

Christy Edman, Assistant to Mark A. Cool

/cme Enclosure

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CHANGE OF REGISTERED OFFICE

OF

FILED 97 SEP -5 MI 8:53 SECRETARY OF STATE ALLAHASSEE, FLORID

COMPREHENSIVE REHABILITATION, INC.

In compliance with Section 607.0502 of the Florida Statutes, the following is submitted:

- 1. The name of the corporation is Comprehensive Rehabilitation, Inc., a Florida corporation.
- The street address of its current registered office is 1946 Tyler Street, Hollywood,
 Florida 33020.
 - 3. The street address to which the registered office is to be changed is as follows:

4000 Hollywood Boulevard Suite 350, North Tower Hollywood, FL 33021

- 4. The name of the corporation's current registered agent is Mark A. Coel, Esq.
- 5. The street address of the corporation's registered office and the street address of the business of its registered agent, as changed, will be identical.
- 6. The change of address of the registered agent's office has been communicated to the corporation by written notice.

Mark A. Coel, Esq., Registered Agent