Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

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From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255

: (305)541-3694

Fax Number

: (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

CARE FIRST OCCPATIONAL CENTER, INC.

1. <u>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</u>	**************************************	- " - 100 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
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ARTICLES OF INCORPORATION

OF

CARE FIRST OCCUPATIONAL CENTER, INC.

FILED

00 SEP 29 AM 9: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator desires to form a corporation pursuant to Chapter 607, Florida Statutes and hereby adopts the following Articles of Incorporation for such corporation.

ARTICLE 1

NAME: The name of the corporation shall be CARE FIRST OCCUPATIONAL CENTER, INC.

ARTICLE 11

PURPOSE AND POWER: The purpose for which the corporation is formed is to engage in any activity and business permitted under the laws of the State of Florida.

ARTICLE III

PRINCIPAL OFFICE: The address of the corporation's principal place of business shall be: 235 West 49th Street
Hialeah, Florida 33012

Prepared By: Marilyn Capo, P.A. Attorney At Law 8550 N.W. 33 Street Suite 200 Miami, Florida 33122

ARTICLE IV

INCORPORATORS: The name and address of the incorporator is:

REINA BETANCOURT 235 West 49th Street Hialeah, Florida 33012

ARTICLE V

SHARES OF STOCK: The aggregate number of shares of stock the corporation is authorized to issue is one hundred (100) shares, which shares shall be common stock having five dollars (\$5.00) par value.

ARTICLE VI

DURATION: The duration of the corporation shall be perpetual.

ARTICLE VII

REGISTERED AGENT: The names and address of the permanent
registered agent is:

MARILYN CAPO 8550 N.W. 33rd Street Suite 200 Miami, Florida 33122

IN WITNESS THEREOF, I have executed these Articles of Incorporation in Miami, Miami-Dade County, Florida, on this

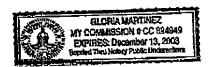
20 day of September, 2000.

REINA BETANCOURT

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

under oath, on this 2000 day of 3000 min 2000, by REINA BETANCOURT who produced the following as identification F.

WING TO FI.



STATE OF FLORIDA)

SS:
COUNTY OF DADE)

The foregoing instrument was acknowledged before me, under oath, on this 2000 day of September, 2000, by MARILYN CAPO who produced the following as identification fl. Drive City and who did take an oath.

NOTARY PUBLIC, STATE OF FL



CERTIFICATE

CARE FIRST OCCUPATION CENTER, INC. 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 Hialeah, County of Dade, State of Florida, as its agent to accept service of process within this state.

Having been named to accept service of process for the abovestated corporation at a 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.

MARILYN ÇAPO

Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA