POIOOOOO 6213

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

NOTE:

70000735333757---5 -01/16/01--0148--005 *****78.75 ******78.75

UBJECT: Altamira Rehab, Inc. (Proposed corporate name - must include suffix)				
Enclosed is a incorporation \$70.00 Filing Fee	n original and and and and a check for a specific and a check for a specific at a spec	one (1) copy of or: \$ 122.50 Filing Fee & Certificate Copy	\$131.25 Filing Fee, Certificate Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FRO	DM:Na	Emma Galtes me (Printed or typed)		FFECTIVE DATE
		3548 SW 13 th terr Address	SECRET TALLAH	01 JAN 16
	Ci	Miami , FI 33145 ity, State and ZIP	ARY OF STASSEE, FLC	E FM 1: 30
		(305) 445-2076	F STATE FLORIDA	8
Daytime Telephone number				

Please provide the original and one copy of the articles

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I Name
The name of the entity to be incorporated shall be:

Altamira Rehab, Inc.

ARTICLE II Principal Office
The principal place of business and mailing address of this corporation shall be:

3548 SW 13th Terr Miami, FL 33145

ARTICLE III Shares
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares at \$ 5.00 each

ARTICLE IV Initial Registered Agent and Street Address The name and Florida street address of the initial registered agent are:

> Emma Galtes 3548 SW 13th Terr Miami, FL 33145

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ARTICLE V Incorporator

The name and address of the incorporator of these Articles of Incorporation is:

Emma Galtes 3548 SW 13th Terr. Miami, FL 33145

President

SECRETARY OF STATE TOLLAHASSEE, FLORIDA Shaa

ARTICLE VI Effective Date

The effective date of starting business shall be:

January 15th, 2001

X 01-11-2001

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

X 01-11-2001

Date