

CORPORATE
ACCESS,
INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK-IN

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01 FEB -8 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1.) Geronimo Rehab, Inc.
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

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*****78.75 *****78.75

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

RECEIVED
01 FEB -8 AM 10:40
DIVISION OF CORPORATION

"When you need ACCESS to the world"

CALL THE FILING AND RETRIEVAL AGENCY DEDICATED TO SERVING YOU!

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 corporation shall be:

Geronimo Rehab, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1100 5TH Avenue South, Suite 201
NAPLES, FLA 34102

ARTICLE III SHARES

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

2 million shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Jon T. Cutler
1100 5TH Ave South, Suite 201
NAPLES, FLA 34102

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Jon T Cutler
1100 5TH Ave South, Suite 201
NAPLES, FLA 34102

Jon T Cutler
Signature/Incorporator

2-6-01
Date

(An additional article must be added if an effective date is requested.)

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.

[Signature]
Signature/Registered Agent

2-6-01
Date