

TRANSMITTAL LETTER

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

02000004572

Subject Medical Rehab Services Corp.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$122.50  
Filing Fee  
& Certified Copy  
(ADDT'L COPY REQ'D)

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate  
(ADDT'L COPY REQ'D)

FROM:	Nellie Akalp
	30141 Agoura Road, Suite 205
	Agoura Hills, California 91301

Please note this is a resubmission.

700004762197--7  
-01/09/02--01035--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 JAN -9 AM 7:20

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

F. CHESSEY JAN 1 5 2001

W 27461

ARTICLES OF INCORPORATION  
OF  
Medical Rehab Services Corp.

*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: Medical Rehab Services Corp.

ARTICLE II      PRINCIPAL OFFICE

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

10840 SW 84th St., Apt. A3  
Miami, Florida 33173

ARTICLE III      SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 100 at \$1.00 par value per share.

ARTICLE IV      INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Abel Colon  
10840 SW 84th St., Apt. A3  
Miami, Florida 33173

ARTICLE V      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Abel Colon  
10840 SW 84th St., Apt. A3  
Miami, Florida 33173

ARTICLE VI      INCORPORATOR

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

Nellie Akalp  
30141 Agoura Road, Suite 205  
Agoura Hills, California 91301

Nellie D Akalp

Nellie Akalp, Incorporator

December 27, 2001

Date

*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.*

Abel Colon

Abel Colon, Registered Agent

1-2-02

Date

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