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Florida Department of State
Division of Corporations
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FLORIDA PROFIT CORPORATION OR P.A.

Smith Therapy Services, Inc.

Certificate of Status	0
Certified Copy	1
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NA

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ARTICLES OF INCORPORATION
OF
SMITH THERAPY SERVICES, INC.

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The undersigned subscribers to these Articles of Incorporation, natural persons, competent to contract, hereby executed these Articles for the purpose of forming a corporation under the laws of the State of Florida.

ARTICLE I.

NAME

The name of this corporation is SMITH THERAPY SERVICES, INC.

ARTICLE II

PURPOSES AND POWERS

The general purpose or purposes for which the corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE III.

AUTHORIZED SHARES OF STOCK

The aggregate number of shares which the corporation is authorized to have outstanding at any time is one thousand (1000) shares with a nominal or par value of ONE AND NO/100 (\$1.00) DOLLAR, per share.

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ARTICLE IV.

PREEMPTIVE RIGHTS

The shareholders of this corporation shall have preemptive rights to any stock issued after the initial subscription designated for the incorporators of the corporation.

ARTICLE V.

EXISTENCE AND EFFECTIVE DATE

This corporation shall exist perpetually, and the commencement of corporate existence shall be the time of the filing of the Articles of Incorporation with the Department of State.

ARTICLE VI.

REGISTERED OFFICE AND RESIDENT AGENT

The registered office of the corporation shall be Route 2, Box 6242, Madison, Florida 32340, and the resident agent of the corporation is CHANDRA C. SMITH, whose physical address is Route 2, Box 6242, Madison, Florida 32340 and whose mailing address is Route 2, Box 6242, Madison, Florida 32340.

ARTICLE VII.

OFFICERS

The initial officers of this corporation shall be as follows:

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<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
Chandra C. Smith	Route 2, Box 6242 Madison, Florida 32340	President, Secretary and Treasurer

ARTICLE VIII.

DIRECTORS

There shall be no directors of this corporation, as this corporation has elected to conduct business by the stockholders pursuant to Section 607.0732, Florida Statutes.

ARTICLE IX.

INCORPORATORS

The name and address of the incorporator of this corporation is:

<u>NAME</u>	<u>ADDRESS</u>
Chandra C. Smith	Route 2, Box 6242 Madison, Florida 32340

ARTICLE X.

TRANSACTIONS WITH INTERESTED PERSON

No contract or other transaction of the corporation with any other person, firm or corporation, or in which this corporation is interested shall be affected or invalidated by

(a) The fact that any one or more of the stockholders of this corporation has an interest in or is a director, officer of stockholder of another corporation; (b) the fact that any stockholder individually or jointly with others may be a party to

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or may be interested in any such contract or transaction, and each and every person who may become a stockholder of the corporation is hereby relieved from any liability that might otherwise arise by reason of his contract with the corporation for the benefit of himself or any firm or corporation in which he may be anywise interested.

IN WITNESS WHEREOF, the said incorporators have hereunto set their hand and seal this JANUARY day of 18TH A. D. 2002.

Chandra C. Smith
CHANDRA C. SMITH, President,
Secretary, Treasurer, and
Incorporator

STATE OF FLORIDA
COUNTY OF MADISON

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above to take acknowledgments, personally appeared CHANDRA C. SMITH, before me known to be the person described as the incorporator in, and who executed the foregoing Articles of Incorporation, and acknowledged before me that they subscribed to these Articles of Incorporation.

WITNESS my hand official seal in the County and State named above this 18th day of January A. D. 2002.

My Commission Expires:

Joyce A. Brown
Notary Public



JOYCE A. BROWN
Notary Public, State of Florida
My comm. expires Feb. 8, 2002
Comm. No. CC 714244

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OR PROCESS WITHIN FLORIDA, NAMING REGISTERED AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH FLA. STAT. 48.091, THE FOLLOWING IS SUBMITTED:

SMITH THERAPY SERVICES, INC., TO ORGANIZE OR QUALIFY UNDER THE LAWS OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT ROUTE 2, BOX 6242, MADISON, FLORIDA 32340, HAS NAMED CHANDRA C. SMITH, WHOSE PHYSICAL ADDRESS IS ROUTE 2, BOX 6242, MADISON, FLORIDA 32340, AND WHOSE MAILING ADDRESS IS ROUTE 2, BOX 6242, MADISON, FLORIDA 32340, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.



CHANDRA C. SMITH

President

Dated: JANUARY 18, 2002

HAVING BEEN NAMED REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF THAT POSITION, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.



CHANDRA C. SMITH

Registered Agent

Dated: JANUARY 18, 2002

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