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EXPRESS CORPORATE FILING SERVICE INC.

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101

(Address)

CORAL GABLES, FL 33134 305-444-4994

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. GABLES THERAPY CENTER, INC. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

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NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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****157.50 *****78.75

Examiner's Initials

ARTICLES OF INCORPORATION
FOR

GABLES THERAPY CENTER, INC.

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:

GABLES THERAPY CENTER, INC.

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02 FEB 13 PM 2:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1763 CORAL WAY
MIAMI, FL

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100

ARTICLE IV REGISTERED AGENT


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

ALAIN CUENCA
1763 CORAL WAY
MIAMI, FL

ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

ALAIN CUENCA
1763 CORAL WAY
MIAMI, FL


Signature of Incorporator

02/12/02
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

ALAIN CUENCA
1763 CORAL WAY
MIAMI, FL

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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

02/12/02
Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA