

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

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SUBJECT: Performance Home Rehab, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 70.00 Filing Fee

\$78.75

Filing Fee

& Certificate of Status

Ճ \$78.75

□ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

From:

Deborah A. Green, Esq.

1860 N. Pine Island Road

Suite 108

Plantation, FL 33322 (954) 236-8282

NOTE: Please provide the original and one copy of the articles me

Thank you.

Sincerely yours,

ehorah A. Green

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: Performance Home Rehab, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 100 S. Pine Island Rd., Suite 136, Plantation, FL 33324 ARTICLES III **PURPOSE** The purpose for which the corporation is organized is: To provide home rehabilitation services. ARTICLE IV SHARES The number of shares of stock is: 500 INITIAL OFFICERS/DIRECTORS(optional) ARTICLES V The name(s) and address(es): Brian M. Mevorah, 100 S. Pine Island Rd., Suite 136, Plantation FL 33324 REGISTERED AGENT ARTICLE VI_ The name and Florida street address of the registered agent is: Brian M. Mevorah, 100 S. Pine Island Rd., Suite 136, Plantation, FL 33324 ARTICLES VII **INCORPORATOR** The name and address of the Incorporator is: Brian M. Mevorah, 100 S. Pine Island Rd., Suite 136, Plantation. FL 33324 Having been named as registered agent to accept service of process for the above stated corporation at the place designed in this certificate) I am familiar with and accept the appointment as registered agent and agree to act in this capacity. $\frac{5-21-02}{\text{Date}}$ 5-21-02 Signature/Registered Agent

Signature/Incorporator

Date