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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)	OFFICE USE ONLY
1. UNIQUE ORTHOPEDIA (Corporation Marie) 3.	BER(S) (if known): C REHABILITATION, INC. (Document #)
(Corporation Name) 4. (Corporation Name) Walk in Pick up time 2.06 Mail out Will wait Photocopy	(Document #) (Document #) Certified Copy (Certificate of Status)
Profit NonProfit Limited Liability Domestication Other Amendment Resignation of R Change of Regist Dissolution/Without Merger	ICNTS I.A., Officer/Director ered Agent
OTHER FILNOS Annual Report Fictitious Name Name Reservation REGISTRATIO QUALIFICATIO Limited Partners Reinstatement	-09/23/0201036006 *****78.75 *****78.75
Trademark Other	Framiner's Initials

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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:

UNIQUE ORTHOPEDIC REHABILITATION, INC.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 8660 S.W. 149 AVE., NUM 214

MIAMI, FL 33193

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 SHARES @ \$1.00 PER VALUE

<u>ARTICLE IV</u>

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agents is:

JOHN ZYGMUNTOWICZ

8660 S.W. 149 AVE., NUM 214

MIAMI, FL 33193

ARTICLE V

INCORPORATOR

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

JOHN ZYGMUNTOWICZ

8660 S.W. 149 AVE., NUM 214

MIAMI, FL 33193

ARTICLE VI

DIRECTOR

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

JOHN ZYGMUNTOWICZ - PRES

8660 S.W. 149 AVE., NUM 214

MIAMI, FL 33193

Signature/Incorporate

Data

Having been named as registered agent and to accept services 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 statues 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/Incorporator

Date