5013A Division of Corporations

Florida Department of State

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Division of Corporations

Fax Number : (850) 205-0381

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number: 1045,2000707 Phone: (305,266-4080

Fax Number : (305)261-6224

FLORIDA PROFIT CORPORATION OR P.A.

ARMI REHAB CENTER, CORP.

Certificate of Status	"	G
Certified Copy	10.	0
Page Count		04
Estimated Charge		\$70.00

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ARTICLES OF INCORPORATION

HALLAHASSEL FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be ARMI REHAB CENTER, CORP.

ARTICLE II PRINCIPAL OFFICE

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

11800 W. 49 ST #119 HIALEAH, FL. 33016

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated *COMMON SHARES.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SERGE CRUZ 11800 W. 49 ST #119 HIALEAH, FL. 33016

Prepared by: SERGE CRUZ

11800 W. 49 ST #119 HIALEAH, FL. 33016 (305) 5129886

Electronically Sent By: BUSINESS WORLD TRANSACTIONS, INC.

7171 CORAL WAY SUITE 205 MIAMI, FL. 33155

(305) 2664080

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SERGE CRUZ 11800 W. 49 ST #119 HIALEAH, FL. 33016 DIRECTOR & PRESIDENT

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Signature

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TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: ARMI REHAB CENTER, CORP.
- 2. The name and address of the registered agent and office is:

SERGE CRUZ 11800 W. 49 ST #119 HIALEAH, FL. 33016

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.

(SIGNATURE)

402000238504