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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634~3694 Fax Number : (305)633~9696

FLORIDA PROFIT CORPORATION OR P.A.

point ives rehabilitation inc.

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Articles of Incorporation

The undersigned incorporator, for the purpose of forming a corporation under the Florida 6 24 A 10: 56 Business Corporation Act, hereby adopts the following Articles of Incorporation. SECRETARY OF STATE TALLAHÁSSÉE, FLÓRÍÐA

ARTICLE I NAME

The name of the corporation shall be: Point Ives Rehabilitation Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 190 NE 199 Street Suite # 105 North Miami, Beach Florida 33179

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: The number shares which this corporation shall have the authority to issue is 100 shares of common stock NO PAR VALUE. Each share shall have equal rights to each other share with respect to dividends voting and in liquidation.

INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are: Arshak Akonyan

190 NE 199 Street Suite # 105 North Mismi, Beach Florida 33179

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Arshak Akopyan 190 NE 199 Street Suite # 105 North Miami, Beach Florida 33179

ARTICLE VI OFFICERS AND DIRECTORS

Arshak Akonyan 190 NE 199 Street Saite # 105 North Miami, Beach Florida 33179

Shirley Bouriolly VPD 190 NE 199 Street Suite # 105 North Miami, Beach Florida 33179

Masture/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certicate, I hereby accept the appoint ment as regimered 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/Registered Agent

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