Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

FLORIDA PROFIT CORPORATION OR P.A.

RIVIERA MEDICAL REHAB INC

D. WHITE JAN 19 2005

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 02 |
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(((H05000013590)))

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:

RIVIERA MEDICAL REHAB INC

FILED

2005 JAN 18 A 948

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1737 45TH ST. WEST PALM BEACH, FL 33407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

FRANK PIERRE JR (PD) 1737 45TH ST. WEST PALM BEACH, FL 33407

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

FRANK PIERRE JR 1737 45TH ST. WEST PALM BEACH, FL 33407

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ne Incorporator

FRANK PIERRE JR. 1737 45TH ST. WEST PALM BEACH, FL 33407

Harring been manted as registered agent to accept ferrice of process for the above stated corporation at the place designated in this certificate, I am position with and accept the appropriate as registered agent and agree to act in this capacity

JANUARY 18, 2005

Date:

JANUARY 18, 2005

Date: