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To:

Division of Corporations
Fax Number : (850)205-0381

Account Name

: J.H. ACCOUNTING SERVICES, INC.

Account Number Phone

: 119990000041 : (941)923-0964 : (941)925-4874

Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

MUSCLE REHAB, INC.

Certificate of Status		0
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Estimated Charge		\$70.00

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8/25/2005

ARTICLES OF INCORPORATION OF MUSCLE REHAB, INC.

The undersigned natural person(s), of the age of 21 or more, acting to form a corporation under the Chapter 607 of the Florida Corporate Code do hereby certify the following:

FIRST: The name of the corporation shall be MUSCLE REHAB, INC.

SECOND: The address of the initial registered office of the corporation is 5777 Beneva Road South, Sarasota, Florida, 34233, County of Sarasota. The name of the registered agent located at said address is Adam Sage.

THIRD: The principal address of the corporation is 4097 Malden Drive, Sarasota, Florida, 34241.

FOURTH: The purpose for which this corporation is organized shall be to engage in the business of massage therapy. The corporation may engage in any other transaction or business permitted under the laws of the United States and of this State.

FIFTH: The total authorized stock of this corporation is divided into 1000 shares of no par value.

SIXTH: The number of directors constituting the initial board of directors are two, and the name(s) and address(es) who will serve as directors until the first annual meeting of shareholders or until their successors are as follows:

Samantha M. Haynes, 4097 Malden Drive, Sarasota, Florida, 34241 Ryan D. Handrich, 4097 Malden Drive, Sarasota, Florida, 34241

SEVENTH: The duration of the corporation is perpetual.

EIGHTH: The name(s) and address(es) of the person who is to act as incorporator(s) are as follows:

Adam Sage, 5777 Beneva Road South, Sarasota, Florida, 34233

We (I), the undersigned, being all the incorporator(s) of the corporation identified above, declare that we have

examined the foregoting this 25th day of August 2005.

State of Florida

County of Sarasota

THE FOREGOING instrument was acknowledged and sworn to before me this 25th day of August 2005 by Adam

Sage.

FRANCES CARLSON MY COMMISSION # DD 267452 EXPIRES: Feb. yary 20, 2008 1-900-3-NOTARY

FL NOTER GUICOURS ASSOC CON

STATE OF FLORIDA DEPARTMENT OF STATE

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

Lagree as Resident Agent to accept Service of Process; to keep an office open during prescribed hours, to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in the office as required by Law.

Adam Sage, Registered Ager