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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

North Florida Rehab 1 Inc.

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| Certificate of Status | 1 |
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J. Shivers JUN 23 2006

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

North Florida Rehab 1 Inc.

ARTICLE II PRINCIPAL OFFICE

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

North Florida Rehab 1 Inc.

**211 SW Friendship Way
Lake City, FL 32024**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Calvin Pryor
211 SW Friendship Way
Lake City, FL 32024**

**Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

Glenn Richter- 211 SW Friendship Way, Lake City, FL 32024- President/Director
Calvin Pryor- 211 SW Friendship Way, Lake City, FL 32024- Vice President/Director

ARTICLES VI INCORPORATOR(S)

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

Glenn Richter- 211 SW Friendship Way, Lake City, FL 32024
Calvin Pryor- 211 SW Friendship Way, Lake City, FL 32024

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22nd day of June 2006.



Glenn Richter - Signature



Calvin Pryor - Signature

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **North Florida Rehab 1 Inc.**

2. The name and address of the registered agent and office is:

Calvin Pryor

Name

211 SW Friendship Way

(P.O. Box or Mail Drop Box NOT Acceptable)

Lake City, FL 32024

(City / State / Zip)

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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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


Calvin Pryor
SIGNATURE

June 22, 2006

(Date)