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To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : HUNT & GROSS, P.A.  
Account Number : I20010000038  
Phone : (561) 997-9223  
Fax Number : (561) 989-8998

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TALLAHASSEE, FLORIDA

## FLORIDA PROFIT/NON PROFIT CORPORATION

SAND LAKE REHABILITATION CLINIC CORP.

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## ARTICLES OF INCORPORATION

## FOR

## SAND LAKE REHABILITATION CLINIC CORP.

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The undersigned, acting as incorporator under the Florida Business Corporation Act, adopts the following Articles of Incorporation for SAND LAKE REHABILITATION CLINIC CORP.

1. The name of the corporation is SAND LAKE REHABILITATION CLINIC CORP.
2. The principal office address of the corporation is 6765 Sunset Strip, Suite 1, Sunrise, Florida 33313.
3. The mailing address of the corporation is 6765 Sunset Strip, Suite 1, Sunrise, Florida 33313.
4. The corporation shall have authority to issue 7,500 shares of stock, all of one class with a par value of \$.01 per share.
5. The corporation's initial registered office is: 2200 NW Corporate Boulevard, Suite 401, Boca Raton, Florida 33431. The name of the corporation's initial registered agent at this office is HCRM Corp.
6. The purpose of the corporation is to engage in any activity or business permitted under the laws of the United States or of the State of Florida.
7. The name and address of the incorporator is:

Name

HCRM Corp.

Address

2200 Corporate Boulevard, N.W.  
Suite 401  
Boca Raton, Florida 3343

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8. The effective date of the corporate existence pursuant to section 607.0203 of the Florida Statutes shall be upon the filings of these articles with the State.

Executed and subscribed at Boca Raton, Florida on November 13, 2007.

HCRM CORP.

By: \_\_\_\_\_

Andrew M. Gross, VP

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**ACCEPTANCE OF REGISTERED AGENT**

HCRM CORP. hereby accepts the above appointment as registered agent of SAND LAKE REHABILITATION CLINIC CORP. and acknowledges that it is familiar with the obligations of that position.

HCRM CORP.

By: \_\_\_\_\_

Andrew M. Gross, VP

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