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Division of Corporations Public Access System

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FLORIDA PROFIT/NON PROFIT CORPORATIO

MIGHTY HANDS REHAB CENTER, INC.

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April 28, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

A.A.ALI, CPA

SUBJECT: MIGHTY HANDS REHAB CENTER, INC.

REF: W08000021276

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P.O BOX 6327 - Tallahassec, Florida 32314

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ARTICLES OF INCORPORATION OF MIGHTY HANDS REHAB CENTER, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME AND ADDRESS

The name and address of the corporation is:

NAME: MIGHTY HANDS REHAB CENTER, INC.

ADDRESS: 1238 N. PINE HILLS ROAD, ORLANDO, FL 32808

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One). Dollar(s) (\$1.00) par value Common Stock, which shall be Stock designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agents of this Corporation is:

Name: DR. ROY PETER CARLSON

Address: 531 S. Grove Street

City: Eustis, Fb 32726

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ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) director initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name:	DR. ROY PETER CARLSON, PRESIDENT	
Address:	1238 N. PINE HILLS ROAD	,
City:	ORLANDO, FL 32808	

ARTICLE VII - INCORPORATORS

The name and address of the person(s) signing these articles of Incorporation are as follows:

Name:	DR. ROY PETER CARLSON, PRESIDENT
Address:	1238 N. PINE HILLS ROAD
City:	ORLANDO, FL 32808

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

DR. ROY PETER CARLSON/Registered Agent

4/16/2008

Date

DR. ROY PETER CARLSON/Incorporator

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