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: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

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# FLORIDA PROFIT/NON PROFIT CORPORATION

# ZOHAR REHABILITATION CENTER, INC

Ccrtificate of Status	0
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May, 13 2009 02:45PM P2

FROM :LAZARUS

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# H09000120979

## ARTICLES OF INCORPORATION

9 MAY 13 PM 1: 05 SECRETARY OF STATE

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:

ZoHar Rehabititation Center, inc

#### ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

1490 South Military trail Suite # 12 West Palm beach FL 33415

# ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

Jenry Urdanivia 1490 South Military trail soute #12 West palm beach FL 33415

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#### **ARTICLE V - INCORPORATOR**

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

Jenry Urdanivia

1490 South Military trail

Sout #12 West Palm beach FL 33415

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES PROPERTY OF INCORPORATION THIS

DAY OF May 2009

SIGNATURE

SIGNATURE

JOSEPH 13 PROPERTY OF SHAPE OF

## **ARTICLE VI - DIRECTOR(S)**

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

Jenry Urdanivia

President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT 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 STATUTES RELATED TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION
AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

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