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Division of Corporations

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

From: Account Name : ARES & COMPANY, C.P.A., P.A.
Account Number : I20000000268
Phone : (305) 229-8256
Fax Number : (305) 229-8252

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FLORIDA PROFIT/NON PROFIT CORPORATION

OMEGA REHABILITATION INC.

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

OMEGA REHABILITATION INC.

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

OMEGA REHABILITATION INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purpose proposed to be transacted and carried on by this corporation are to do any and all of the things, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ARES & COMPANY C.P.A., P.A.
3636 SW 87TH AVE.
MIAMI, FL. 33165
PH: (305) 229-8256
FAX: (305) 229-8252

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Transact any and all lawful business.

- (1) Said corporation shall further have powers:
To have perpetual succession by its corporate name,

OMEGA REHABILITATION INC.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of US\$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The name and street address of the initial Registered Agent of this corporation shall be:

MIGUEL BENGOCHEA
9357 FONTAINEBLEAU BLVD.
BLDG. D - APT.407
MIAMI, FL. 33172

The principal office and mailing address shall be:

9357 FONTAINEBLEAU BLVD.
BLDG. D - APT. 407
MIAMI, FL. 33172

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ARTICLE VI

The initial Board of Directors and Shareholders shall be composed by one (1) person, whose name and address is:

MIGUEL BENGOCHEA - PRESIDENT - 100% SHAREHOLDER
9357 FONTAINEBLEAU BLVD.
BLDG. D - APT. 407
MIAMI, FL. 33172

The name and address of the incorporator executing these Articles of Incorporation is:

MIGUEL BENGOCHEA
9357 FONTAINEBLEAU BLVD.
BLDG. D - APT. 407
MIAMI, FL. 33172

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 3RD day of June, 2009.



MIGUEL BENGOCHEA
INCORPORATOR / PRESIDENT

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SECRETARY OF STATE ((H09000134642 3)))
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the law of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the Corporation is:

OMEGA REHABILITATION INC.

2. The name and address of the Registered Agent and office is:

MIGUEL BENGOCHEA
9357 FONTAINEBLEAU BLVD.
BLDG. D - APT. 407
MIAMI, FL. 33172

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 STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: _____


MIGUEL BENGOCHEA

DATE: _____

06/03/09

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