

P10000005825

Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
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TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
HEAVEN REHAB THERAPY, INC.

Certificate of Status	0
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Page Count	03
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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APPROVED
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ARTICLES OF INCORPORATION

10 JAN 20 PM 2:25

OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HEAVEN REHAB THERAPY, INC.

(name of corporation)

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

ARTICLE I - CORPORATE NAME

The name of the corporation is: HEAVEN REHAB THERAPY, INC.

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 permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One hundred shares (100) of five Dollar (s)
(\$ 5.00) par value common stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

NAME	DANNIELLY OLAZABAL				
ADDRESS	1250 SW 27 AVE SUITE 507				
CITY	MIAMI	STATE	FL	ZIP	33135

The principal office, if known or the mailing address of the corporation is:

NAME	DANNIELLY OLAZABAL				
ADDRESS	1250 SW 27 AVE SUITE 507				
CITY	MIAMI	STATE	FL	ZIP	33135

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have THREE (3) director initially. The number of directors may be
either increased or diminished from time to time by - laws, but shall never be less than one (1).

The name and addresses of the initial director (s) of the corporation are as follows:

NAME	FRANCESCO BUTTAFOCO	(PRESIDENT)
ADDRESS	500 NW 33 AVE	
CITY	MIAMI	STATE FL ZIP 33125
NAME	DANNIELLY OLAZABAL	(VICE-PRESIDENT)
ADDRESS	3050 NW 13 ST	
CITY	MIAMI	STATE FL ZIP 33125
NAME	ONAISSY R. NARANJO	(DIRECTOR)
ADDRESS	4590 W 8 AVE	
CITY	HIALEAH	STATE FL ZIP 33012
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		

ARTICLE VII - INCORPORATORS





The name and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	FRANCESCO BUTTAFOCO	(PRESIDENT)
ADDRESS	500 NW 33 AVE	
CITY	MIAMI	STATE FL ZIP 33194
NAME	DANNIELLY OLAZABAL	(VICE-PRESIDENT)
ADDRESS	3050 NW 13 ST	
CITY	MIAMI	STATE FL ZIP 33125
NAME	ONAISSY R. NARANJO	(DIRECTOR)
ADDRESS	4590 W 8 AVE	
CITY	HIALEAH	STATE FL ZIP 33012
NAME		
ADDRESS		
CITY		
NAME		
ADDRESS		
CITY		

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 19TH day January, 2010.

PREPARED: SOSA ACCOUNTING TAX SERVICE
570 EAST 49 STREET
HIALEAH, FL 33013

(305) 688 - 1716
(305) 688 - 1714

 (Seal)
 (Seal)
 (Seal)
 (Seal)

APPROVED
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**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT

OF

HEAVEN REHAB THERAPY, INC.

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, to organize under the laws of the State of Florida with its
registered office as indicated in the Articles of Incorporation.

Address 1250 SW 27 AVE SUITE 507

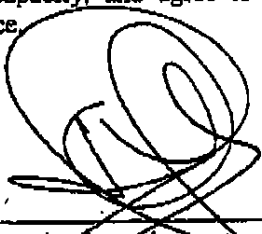
MIAMI, FL 33135

Has named DANNIELLY OLAZABAL

Located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above state
corporation at the place designated in this certificate, and being familiar with the
obligations of that position, I hereby accept to act in this capacity, and agree to comply
with provisions of Florida Law in keeping open said office.


(registered agent)