

H10000194581

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act hereby adopts the following Articles of Incorporation.

ARTICLE 1 – NAME

The name of the corporation shall be:

TS Rehab Solutions, Inc.

ARTICLE 2 – PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**15825 SW 89 Ave
Palmetto Bay, FL 33175**

ARTICLE 3 – SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is:

One hundred (100) shares; \$1.00 par value.

ARTICLE 4 – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Tania Somoano
15825 SW 89 Ave
Palmetto Bay, FL 33157**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE 5 - INCORPORATOR

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

Tania Somoano

ARTICLE 6 - DIRECTORS

President

**Tania Somoano
15825 SW 89 Ave
Palmetto Bay, FL 33157**

The undersigned incorporator has executed these Articles of Incorporation this
31st Day of August, 2010


Tania Somoano

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H10000194581**CERTIFICATE OF DESIGNATION REGISTERED
AGENT/REGISTERED OFFICE**

Pursuant To the provisions of sections 607.0501 or 617.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the designation of the registered agent/registered office, in the State of Florida.

- 1.- The name of the Corporation is : **TS Rehab Solutions, Inc**
- 2.- The name and address of the registered agent and office is:

**Tania Somoano
15825 SW 89 Avenue
Palmetto Bay, FL 33157**

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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: _____

Date: 8-31-10

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