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FLORIDA PROFIT/NON PROFIT CORPORATION  
ATRIUM REHAB CENTER, CORP

Certificate of Status	0
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**H10000200063****ARTICLES OF INCORPORATION**

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:

ATRIUM Rehab Center, Corp

**ARTICLE II - PRINCIPAL OFFICE**

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

3900 NW 79 AVE Suite 512  
MIAMI - FL 33166

**ARTICLE III - SHARES**

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

100

**ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Leticia CRUZ

3900 NW 79 AVE Suite 512  
Miami - FL 33166

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ARTICLE V - INCORPORATOR

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

Leticia Cruz  
3900 NW 79 AVE Suite 512  
Miami - FL 33166

The undersigned incorporator has executed these Articles of Incorporation this

09 day of September 20, 10.

  
Signature

ARTICLE VI - DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

LETICIA CRUZ (P)

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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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