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CORPORATE FILING SERVICE

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ST BARBAR	A REHAB, INC
(Corporation Name)	(Document #)
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EW FILINGS	AMENDMENTS
Profit	Amendment Resignation of R.A., Officer/Director
Not for Profit Limited Liability Domestication Other	Change of Registered Agent Dissolution/Withdrawal Merger
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal
Limited Liability Domestication Other	Change of Registered Agent Dissolution/Withdrawal Merger

FILED 10 DEC -6 AM 8: 23

ARTICLES OF INCORPORATION

The undersigned incorporates, for the purpose of forming a corporation under the Florida, #1 (17/10) is Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

St. Barbara Rehab, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

410 W 29 St Ste F Hialeah, FL. 33012

ARTICLE III – PURPOSE

For Profit

ARTICLE IV - SHARES

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

ONE HUNDRED SHARES AT \$1.00 PER VALUE

ARTICLE V – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nadiheya Molina Gonzalez 2582 SW 38 Ct Miami, FL. 33134

ARTICLE VI – INCORPORATOR

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

Nadiheya Molina Gonzalez 2582 SW 38 Ct Miami, FL. 33134

The undersigned incorporator has executed these Articles of Incorporation this 1st day of December 2010.

Signature

ARTICLE VII - DIRECTOR(S)

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

PRESIDENT
Nadiheya Molina Gonzalez
SECRETARY
Nadiheya Molina Gonzalez
VICE-PRESIDENT
Nadiheya Molina Gonzalez
TREASURER
Nadiheya Molina Gonzalez

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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 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 obligation of my position as Registered Agent.

Signature

Witness my hand and official seal at Hialeah, Miami-Dade County, Florida this 1st day of December 2010.

Notary Public, State of Florida

Seal:



