

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
M.A.F. REHAB CENTER INC.

Certificate of Status	0
Certified Copy	1
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11 MAR -8 PM 1:59
DIVISION OF CORP. OF FLORIDA

FILED
2011 MAR -8 AM 10:51
TALLAHASSEE, FLORIDA
J. B. BROWN MAR 09 2011

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

M.A.F. REHAB CENTER INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9600 SW 8 STREET

STE: 15

MIAMI, FL 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MANUEL FERNANDEZ, MD, P.A. (P)

GRAZIELLA P. FERNANDEZ (V)

9600 SW 8 STREET STE: 15

MIAMI, FL 33174

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MANUEL FERNANDEZ, MD, P.A.

9600 SW 8 STREET STE: 15

MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

MANUEL FERNANDEZ, MD, P.A.

9600 SW 8 STREET STE: 15

MIAMI, FL 33174

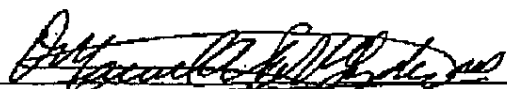
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature Registered Agent

03-07-2011

Date



Signature Incorporator

03-07-2011

Date

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CLERK OF THE
SOUTH DALLAHASSEE, FLORIDA