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FLORIDA PROFIT/NON PROFIT CORPORATION  
INTERNATIONAL THERAPY, INC.

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March 22, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

BERRIZ & GIRALDO P.A.

SUBJECT: INTERNATIONAL THERAPY, INC  
REF: W11000016201

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L10000039792 INTERNATIONAL THERAPY LLC.

If you have any further questions concerning your document, please call (850) 245-6929.

Justin M Shivers  
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ARTICLES OF INCORPORATION

OF

INTERNATIONAL REHAB, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

INTERNATIONAL REHAB, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:  
To have perpetual succession by its corporate name:

INTERNATIONAL REHAB, INC.

CLARA GIRALDO P.A.  
4080 SW 84 AVE SUITE C  
MIAMI, FL 33155  
(305) 485-9300

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STATE OF FLORIDA  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

**LAURI RHYMER  
1414 NW 107 AVE # 314  
MIAMI, FL. 33172**

The principal office shall be:

**1414 NW 107 AVE # 314  
MIAMI, FL. 33172**

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ARTICLE VI

The initial Board of Directors shall consist of a total of **ONE(01)** person, and the name and address of the person who is to serve as an initial director is:

**LAURI RHYMER**  
**1414 NW 107 AVE # 314**  
**MIAMI, FL. 33172**

**PRESIDENT**

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

**LAURI RHYMER**  
**1414 NW 107 AVE # 314**  
**MIAMI, FL. 33172**

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 17 day of MARCH 2011

Lauri Rhymer.  
**LAURI RHYMER**

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

Pursuant to the provision 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 designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

**INTERNATIONAL REHAB , INC.**

2. The Name and Address of the registered agent and office is

**LAURI RHYMER  
1414 NW 107 AVE # 314  
MIAMI, FL. 33172**

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. ANN I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Lauri Rhymer  
Dated: MARCH 17 2011

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