Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION QUALITY CARE REHAB CENTER, INC.

 Certificate of Status
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ANALYSSEE, FLORIDA

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December 20, 2011

FLORIDA DEPARTMENT OF STATE Division of Corporations

LAZARUS

SUBJECT: QUALITY CARE REHAB CENTER, INC.

RRF: W11000063141

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax 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 p010000090603.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight FAX #: H11000296660
Regulatory Specialist II Supervisor DEPARTMENT OF 211A00028276
New Filing Section Division of Corporations

10/31/2029 02:07

Division of Corporations

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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.

EFFECTIVE DATE 01/01/3013

ARTICLE I - NAME

The name of the corporation shall be:

PREMIUM CARE REHAB CENTER, INC. EFFECTIVE DATE: 01-01-12 ARTICLE 11-PRINCIPAL OFFICE

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

8080 W Flagler St. Suite I-A Miani, Fl 33144.

ARTICLE III - SHARES

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

OOI

1LED 20 M 9: 28 AFE OF STATE ASSEE, FLORIDA

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

arpseir Valerio 8080 w Flabler St Swite 1-A Miani, Fl 33144.

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ARTICLE V - INCORPORATOR

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

Anaseli Valerio 8080 W-FLAGLER ST. Suite 1-A. Miami FL 33144

The undersigned incorporator has executed these Articles of Incorporation this

1974 day of DECEMBER 20 //...

ARTICLE VI- DIRECTOR (S)

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

ANASELI VALERIO (P)

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SECRETARY OF STATE
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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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