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TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

SECRET 142200Z  
-03/06/95--01017--0005  
\*\*\*122.50 \*\*\*122.50

SUBJECT: J. Q REHABILITATION & WELLNESS , INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$122.50.

FROM: J.Q. REHABILITATION & WELLNESS, INC.

SUITE #190  
11929 E. COLONIAL DR.  
Orlando Florida 32826

PHONE: 407-380-6942

Enclosures  
Original and One Copy of Articles

FILED  
95 MAR -6 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. BROWN MAR - 7 1995

*Articles of Incorporation*  
*of*

FILED  
95 MAR -6 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***J.Q. REHABILITATION & WELLNESS, INC.\_***

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:

J.Q. REHABILITATION & WELLNESS, INC.

***Article II - Principal Office***

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

J.Q. REHABILITATION & WELLNESS, INC.

SUITE # 190  
11929 E. COLONIAL DR.  
Orlando Florida 32826

***Article III - Shares***

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 6+0

100 at No Par Value

***Article IV - Initial Registered Agent and Street Address***

The name and address of the initial registered agent is:

CHRISTINE CHEW  
8748 Wittenwood Cove  
Orlando Fl 32836

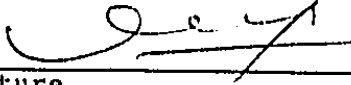
*Article V - Incorporator(s)*

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

Jia Qiu  
Suite # 190  
11929 E. COLONIAL DR.  
Orlando, FL 32826

The undersigned incorporator(s) has(have) executed these Articles of Incorporation

this 1st Day of February, 1995.

  
\_\_\_\_\_  
Signature

***Certificate of Designation of  
Registered Agent/Registered Office***

FILED  
95 MAR -6 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR (17.0501, 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: J.Q. REHABILITATION & WELLNESS, INC.

2. The name and address of the registered agent and office is:

Christine Chew  
8748 Whittenwood Cove  
Orlando, FL 32714

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, and I am familiar with and accept the obligations of my position as registered agent.

  
Signature

3-1-95  
DATE