

TRANSMITTAL LETTER

1/3/96

Department Of State Division Of Corporations Pob 6327 Tallahassee, Fl.32314 5000001 5591 1.665 -01/17/96--01107--004 ****122.50 ****122.50

SUBJECT: PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$122,50.

FROM:

Saul Lernor
PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.
1110-B East Hallandale Beach Boulevard
Hallandale, Florida 33009
(954) 454-7290

DIVISION OF CORPORATIONS

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FLORIDA ARTICLES OF INCORPORATION OF PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.

The undersigned, for the purpose of forming a Corporation under the Florida General Corporation Act hereby adopt the following Articles of Incorporation:

ARTICLE 1

The name of the corporation is PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.

ARTICLE II

The address of the principal office is 1110-B East Hallandale Beach Boulevard, Hallandale, Florida 33009.

ARTICLE III

The aggregate number of shares which the corporation has authority to issue is five hundred thousand (500,000), all of which shall be common shares with no par value.

ARTICLE IV

The street address of the corporation's initial registered office is 1110-B East Hallandale Beach Boulevard, Hallandale, Florida 33009 and the name of its initial registered agent at this office is SAUL LERNER.

ARTICLE V

The name and address of the sole incorporator is:

SAUL LERNER

PHYSICAL THERAPY SERVICES OF HALLANDALE, INC. 1110-B EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FLORIDA 33009.

The name and address of the sole initial director is:

SAUL LERNER

PHYSICAL THERAPY SERVICES OF HALLANDALE, INC. 1110-B EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FLORIDA 33009.

ARTICLE VI

The purposes for which the corporation is organized are to carry on any and all lawful business purposes not otherwise prohibited by law.

ARTICLE VII

The term of the corporation is perpetual.



The undersigned has executed these artic	cles of incorporation this	day of January, 1996.
SAUL LERNER, Incorporator	(Scal)	
STATE OF FLORIDA		
COUNTY OF BROWARD		
BE IT REMEMBERED that on this day and County named above to take acknown personally known to be the person des Incorporation, and he acknowledged before WITNESS my official hand and seal at	wledgments personally appear scribed as the incorporator in ore me that he executed said A	ed SAUL LERNER, to me the foregoing Articles of articles of Incorporation.
January, 1996.		Glate, tius 70 day of
	OFFICIAL NOTARY SEAL NORMA PANDOLF	
	TARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC358604 Y COMMISSION EXP. MAR. 23,1998	
	TARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC358604	
	TARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC358604	
NOTARY PUBLIC	TARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC358604	

CERTIFICATE OF DESIGNATION REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered ofice/registered agent, in the State of Florida.

- 1. The name of the corporation is: PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.
- 2. The name and address of the registered agent and office is:

SAUL LERNER
PHYSICAL THERAPY SERVICES OF HALLANDALE, INC.
1110-B EAST HALLANDALE BEACH BOULEVARD
HALLANDALE, FLORIDA 33009

SIGNATURE:
TITLE: Incorporator
DATE: January / O , 1996

SECRETARY OF STATE OF VISION OF CORPORATION

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 HETEBY 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:

DATE:

January / \mathcal{D} , 199