Document Number Only 96000014525 Alicia Fajardo
Ruguentor Namami Canal Rd Phone 1.00001713251 -02/19/96--01062--017 *****70.00 *****70.00 CORPORATION(S) NAME (*) Profit () NonProfit () Amendment () Merger () Foreign () Dissolution/Withdrawal () Mark () Limited Partnership () Annual Report () Other () Reinstatement () Reservation () Change of R.A. () Certified Copy () Photo Copies () CUS () Call When Ready () Call if Problem () After 4:30 () Walk In () Will Wait () Pick Up () Mail Out Name Avallability Document Examiner f Chessea Updater FEB 1 0 1996 Verilier Acknowledgment W.P. Verifler

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ARTICLE I

THE NAME OF THIS CORPORATION IS GOLDEN HEALTH REHABILITATION CENTER, INC. and the mailing address is 6715 Tamiami Canal Rd. Miami, Fl. 33126

ARTICLE II DURATION

This corporation shall have a perpetual existence, unless dissolved according to law.

ARTICLE III PURPOSE

This corporation is organized for the purpose of transacting any or all business for which corporation may be incorporated under the Florida General Corporation Act.

ARTICLE IV CAPITAL STOCK

This corporation is authorized to issue One Thousand (1,000) shares of One Dollar (1.00) par value common stock, which shall be designated "COMMON SHARES."

ARTICLE V INITIAL REGISTERED OFFICE & AGENT

The street address of the initial registered office of this corporation is 6715 Tamiami Canal Rd. Miami, Fl. 33126, and the name of the initial registered agent of this corporation at that address is Alicia Fajardo

ARTICLE VI INITIAL BOARD OF DIRECTOR(S)

This corporation shall have (1) (one) Director(s) initially. The number of Director(s) may be either increased or decreased from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial Director(s) of this corporation is/are:

Alicia Fajardo 6715 Tamiami Canal Rd. Miami, Fl. 33126

ARTICLE VII INDEMNIFICATION

To the full extent permitted by law, the corporation shall indemnify each person made or threatened to be made a party to any threatened, pending or completed action, suit, or proceeding, whether civil, criminal, administrative or investigative (including, one in the right of the corporation to procure a judgment in its favor) by reason of the fact that her or his testator or intestate, is or was a director, officer, employee or agent of the corporation or served any other corporation, partnership, joint venture, trust, or other enterprise in any capacity, at the request of the corporation.

ARTICLE VIII OFFICERS

The officers of this corporation shall be as follows:

Alicia Fajardo President & Treasurer

Vice President & Secretary

ARTICLE IX

INCORPORATOR (S)

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

Alicia Fajardo 6715 Tamiami Canal Rd. Miami, Fl. 33126

The undersigned incorporator(s) has/have executed these Articles of Incorporation on this February 5th, 1996

Glue Fajano

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, notary public authorized to take acknowledgments in the state and county set forth above personally appeared Alicia Fajardo known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he/she acknowledged before me that he/she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid this February 5th, 1996

My commission expires:

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OFFICIAL NOTARY SEAL GEORGE GONZALEZ COMMISSION NUMBER CC456438
MY COMMISSION EXP. MAY 8,1999

CERTIFICATE DESIGNAING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091 Florida Status, the following is submitted, in compliance with said Act:

First -- That GOLDEN HEALTH REHABILITATION CENTER, INC. is desiring to organize under the laws of the State of Florida with its principal office at 6715 Tamiami Canal Rd. Miami, Fl. 33126, has named Alicia Fajardo located at 6715 Tamiami Canal Rd. Miami, Fl. 33126, as its agent to accept service of process within this state.

Having been named to accept service of process of the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Bv:

FILED