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Rehab Supplies, Inc. 734 North 3rd Street, Suite 214 Leesburg, FL 34748

March 27, 1996

Divisions of Corporations Department of State P.O. Box 6327 Tallahassee, FL 32314

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Dear Division of Corporations:

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Enclosed please find Articles of Incorporation for Rehab Supplies, Inc. along with a check in the amount of \$122.50 for the filing fee, designation of registered agent and certified copy of the Articles of Incorporation.

Please return the certified copy to the above address.

Sincerely,

Nanci D. Wynn President

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Articles of Incorporation of Rehab Supplies, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME

The name of the comporation shall be: Rehab Supplies, Inc.

ARTICLE II - PRINCIPLE OFFICE & MAILING ADDRESS

The principle place of business of this corporation shall be:

734 North 3rd Street, Suite 214 Leesburg, FL 34748

The mailing address of this corporation shall be:

734 North 3rd Street, Suite 214 Leesburg, FL 34748

ARTICLE III - CAPITAL STOCK

The corporation shall have the authority to issue 300 shares of common stock, in one class only, each with a par value of \$1.00.

ARTICLE IV - REGISTERED AGENT & ADDRESS

The registered agent of the corporation is Sherri Reinhardt and the registered address is 28643 Shirley Shores Road, Tavares, FL 32778.

ARTICLE V - BOARD OF DIRECTORS

The initial Board of Directors shall have two members whose names and address are as follows:

Nanci D. Wynn, President 4995 E. C.R. 462 Wildwood, FL 34785

Sherri Reinhardt, Secy 28643 Shirley Shores Road Tavares, Florida 32778

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

ARTICLE VI - INCORPORATOR

The incorporator of this corporation is Nanci D. Wynn, whose address is 4995 E. C.R. 462, Wildwood, FL 34785.

Dated 3/27/96

Nanci D. Dwynn Incorporator

Having been named as registered agent and to accept service of the 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 am familiar with and accept the obligations of my position as registered agent.

Dated 3/27/96

Sherri Reinhardt, Registered Agent

Certificate of Designation Registered Agent/Registered Office

Pursuant to the provisions 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.

The name of the corporation is:

Rehab Supplies, Inc.

The name and address of the registered agent is:

Sherri Reinhardt 28643 Shirley Shores Road Tavares, Florida 32778

Having been named as registered agent and to accept service of process for the above state 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 provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

DATE 3/27/96