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April 10, 1996

Department of State, Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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Re: MILESTONES THERAPY CENTER, INC.

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of Milestones Therapy Center, Inc. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

Peggy Shaw

6251 Park Blvd., Suite #9, Pinellas Park, FL

34665

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ARTICLES OF INCORPORATION

OF

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MILESTONES THERAPY CENTER, INC.

ARTICLE I

The name of the Corporation is Milestones Therapy Center, Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 6251 Park Blvd., Suite #9, Pinellas Park, FL 34665.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 6251 Park Blvd, Suite #9, Pinellas Park, Florida 34665, and the name of the Corporation's initial registered sigent for service of process at such address is Peggy Shaw, OTR/L.

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is: Peggy Shaw, 6251 Park Blvd., Suite #9, Pinellas Park, FL 34665.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of

Pelggy Shaw

6251 Park Blvd., Suite #9, Pinellas Park, FL 34665

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.

- 1. The name of the corporation is: Milestones Therapy Center, Inc.
- The name of the registered agent and office is:

Peggy Shaw, OTR/L 6251 Park Blvd, Suite #9, Pinellas Park, Florida 34665

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 - 4311- Showord C