200 Hays Street
Tallahassee, FL 32301
904-222-8171
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800-342-8036

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ACCOUNT NO. : 072100000000

REFERENCE : 945961 00531A

AUTHORIZATION : Patricia Pyatt 5/7/96

COST LIMIT : $ 122.50

ORDER DATE : May 8, 1996

ORDER TIME : 9:53 AM

ORDER NO. : 945961

300001811351 8

CUSTOMER NO: 00531A

CUSTOMER: William B. Watson, III, Esq
WATSON FOLDS STEADHAM
CHRISTMANN BRASHEAR TOVKACH
527 East University Avenue

Gainesville, FL 32601

DOMESTIC FILING

NAME: LAKE AREA PHYSICAL THERAPY, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

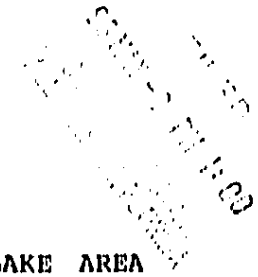
EXAMINER'S INITIALS: 5/10/96

RECEIVED
96 MAY -8 AM 11:21
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION

OF

LAKE AREA PHYSICAL THERAPY, INC.



5/7/96

Article I

Name. The name of this Corporation is LAKE AREA PHYSICAL THERAPY, INC.

Article II

Duration. The period of duration of this Corporation shall be perpetual, commencing on the date of execution and acknowledgment of these articles.

Article III

Purpose. The purpose of this Corporation is to engage in any activities or businesses permitted under the laws of the United States and under the Florida General Corporation Act including, but not limiting the acquisition of life insurance bonds, debentures, commodities, leaseholds, options, puts and calls, easements, mortgages, notes, mutual funds, investment trusts, common trust funds, voting trust certificates, and any class of stock or right to subscribe for stock, including trading on margin.

Article IV

Capital Stock. This Corporation is authorized to issue 1000 shares of One Cent ($.01) par value common stock.

Article V

By-Laws. The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and Shareholders.

Article VI

Initial Registered Office and Agent. The street address of the principal office is Highway 26 and Center Court, Melrose, Florida 32666, and the street address of the initial registered office of this Corporation is 527 East University Avenue, Gainesville, Florida 32601, and the name of the initial registered agent of this Corporation is WILLIAM B. WATSON, III.

Article VII

Initial Board of Directors. The Corporation shall have one (1) Director initially. The number of Directors may either be increased or diminished from time to time by the By-Laws, but it shall never be less than one. The name and address of the initial Director of this Corporation is William B. Watson, III, 527 East University Avenue, Gainesville, Florida 32601.

Article VIII

Incorporator. The name and address of the person signing these Articles is WILLIAM B. WATSON, III, 527 East University Avenue, Gainesville, Florida 32601.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 7th day of May, 1996.

William B. Watson, III

WILLIAM B. WATSON, III,
Incorporator

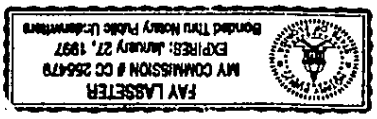
STATE OF FLORIDA
COUNTY OF ALACHUA

Before me, personally appeared WILLIAM B. WATSON, III, who is personlly known to me, and says that he is Incorporator of these Articles of Incorporation and as such Incorporator verifies that all statements and information contained herein are true and correct.

DATED this 7th day of May, 1996.

Sign Fay Lassetter
Print _____
Notary Public
My Commission Expires:

(SEAL)



CERTIFICATE DESIGNATING 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 Statutes, the following is submitted, in compliance with said Act:

First -That **LAKE AREA PHYSICAL THERAPY, INC.**, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at City of Gainesville, County of Alachua, State of Florida, has named WILLIAM B. WATSON, III, located at 527 East University Avenue, City of Gainesville, County of Alachua, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for 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 provisions of said Act relative to keeping open said office.

By: William B. Watson, III
William B. Watson, III
Resident Agent

C/corp/cer

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

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Resident Agent

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