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TALLAHASSEE, FL 32301-2607
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PRENTICE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 196742

8896A

96 DEC 20 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : December 20, 1996

ORDER TIME : 10:17 AM

ORDER NO. : 196742-005

CUSTOMER NO: 8896A

CUSTOMER: Hunter B. Craig, Esq
WITTE & CRAIG

201 S.e. 24th Avenue

Pompano Beach, FL 33062

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DOMESTIC FILING

NAME: ABOUT SERVICE MEDICAL
& REHAB CO.

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: W. Charles Earnest

EXAMINER'S INITIALS:

WCE
12/20/96

RECEIVED
96 DEC 20 AM 11:21
DIVISION OF CORPORATION

WITTE & CRAIG, P.A.

Attorneys at Law

LARRY F. WITTE
HUNTER B. CRAIG

201 SOUTHEAST 24th AVENUE
POMPANO BEACH, FLORIDA 33062
(954) 941-5533
FAX NO. (954) 942-0146

December 19, 1996

HAND DELIVERED

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

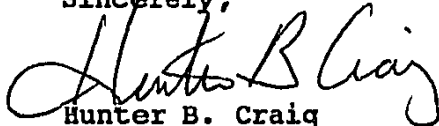
Re: Incorporation of **ABOUT SERVICE MEDICAL & REHAB CO.**

Dear Filing Officer:

Enclosed please find the original executed Articles of Incorporation of the above-referenced corporation and the Resident Agent Designation and Acceptance, together with our Trust Account check in the amount of \$122.50 representing the filing fee of \$35.00 for the Articles of Incorporation, filing fee of \$35.00 for the Designation and Acceptance of the Resident Agent and \$52.50 for a certified copy.

Please file the enclosed and return the certified copy at your earliest convenience. Thank you for your assistance with this matter. If you should require anything further, or have any questions, please do not hesitate to contact me at your convenience.

Sincerely,


Hunter B. Craig

HBC/mc
Enclosures (3)

cc: Mr. P. Steven Mulder

FILED

ARTICLES OF INCORPORATION
OF
ABOUT SERVICE MEDICAL & REHAB CO.

96 DEC 20 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, a natural person competent to contract, does hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I

CORPORATE NAME

The name of this Corporation shall be: ABOUT SERVICE MEDICAL & REHAB CO.

ARTICLE II

PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is: 7300 DEL PRADO CIRCLE SOUTH, BOCA RATON, FLORIDA 33433.

ARTICLE III

NATURE OF CORPORATE BUSINESS AND POWERS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida or any other state, country, territory or nation.

ARTICLE IV

CAPITAL STOCK

The maximum number of shares that this Corporation shall be authorized to issue and have outstanding at any one time shall be 1000 shares common stock having \$1.00 par value.

ARTICLE V

PREEMPTIVE RIGHTS

This corporation elects to have preemptive rights.

ARTICLE VI

REGISTERED AGENT AND
INITIAL REGISTERED OFFICE IN FLORIDA

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be:

P. STEVEN MULDER
7300 DEL PRADO CIRCLE SOUTH
BOCA RATON, FLORIDA 33433

ARTICLE VII

TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VIII

BOARD OF DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to

any limitation set forth in these Articles of Incorporation. This Corporation shall have one (1) Directors initially.

ARTICLE IX

INCORPORATOR

The name of the person signing these Articles of Incorporation as the Incorporator is P. STEVEN MULDER, 7300 DEL PRADO CIRCLE SOUTH, BOCA RATON, FLORIDA 33433.

ARTICLE X

INDEMNIFICATION

This Corporation may indemnify any director, officer, employee or agent of the Corporation to the fullest extent permitted by Florida law.



P. STEVEN MULDER, Incorporator

FILED

CERTIFICATE DESIGNATING REGISTERED AGENT

96 DEC 20 PM 1:47

AND OFFICE FOR SERVICE OF PROCESS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ABOUT SERVICE MEDICAL & REHAB CO., a corporation existing under the laws of the State of Florida with its principal office and mailing address at 7300 DEL PRADO CIRCLE SOUTH, BOCA RATON, FLORIDA 33433, has named P. STEVEN MULDER whose address is 7300 DEL PRADO CIRCLE SOUTH, BOCA RATON, FLORIDA 33433, as its agent to accept service of process within the State of Florida.

ACCEPTANCE:

Having been named to accept service of process for the above named Corporation, at the place designated in this Certificate, I hereby accept the appointment as Registered Agent, and agree to comply with all applicable provisions of law. In addition, I hereby am familiar with and accept the obligations, duties and responsibilities as Registered Agent for said Corporation.



P. STEVEN MULDER