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

800002186178--5 -05/21/97--01018--004 *****78.75 *****78.75

SUBJECT:		sultants, Inc. ate name - must include suff	ix)
Enclosed is an original	and one(1) copy of the article	s of incorporation and a c	check for :
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
TD 0) 4	Susan G. Francis	ADDITIONAL CO	PY REQUIRED
FROM:	Name (Printed	l or typed)	
	4410 N.W. 113th	Terrace	į
	Addre Coral Springs,	Florida 33065	97 JUN 26
	City, State (954) 752 - 22 Daytime Teleph MAY 22	95	JUN 26 PH 12: 23

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 22, 1997

SUSAN G. FRANCIS 4410 N.W. 113TH TERRACE CORAL SPRINGS, FL 33065

SUBJECT: B & F REHAB CONSULTANTS, INC.

Ref. Number: W97000012097

We have received your document for B & F REHAB CONSULTANTS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Bylaws are not filed with this office. Please retain them for your records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 397A00028020

CERTIFICATE OF INCORPORATION

97 JUN 26 PM 12: 23

OF

B & F REHAB CONSULTANTS, INC.

The undersigned, a natural person, for purpose of organizing a corporation for conducting the business and promoting the purposes hereinafter stated, under the provisions and subject to the requirements of the laws of the State of Florida hereby certifies that:

FIRST: The name of the corporation (hereinafter called the "corporation") is B & F REHAB CONSULTANTS, INC.

SECOND: The address, including street, number, city and county, of the registered office of the corporation in the State of Florida is 4410 N.W. 113th Terrace, City of Coral Springs 33065, County of Broward; and the name of the registered agent of the corporation in the State of Florida at such address is Susan G. Francis.

THIRD: The purposes of the corporation are to engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida.

FOURTH: The total number of shares of stock which the corporation shall have authority to issue is 1,000. The par value of each of such shares is \$.01. All such shares are of one class and are shares of Common Stock.

FIFTH: The name and mailing address of the incorporator are as follows:

NAME

MAILING ADDRESS

Susan G. Francis

4410 N.W. 113th Terrace, Coral Springs, FL 33065

SIXTH: The corporation is to have perpetual existence.

SEVENTH: The personal liability of the directors of the corporation is hereby eliminated to the fullest extent permitted by the provisions of the laws of the State of Florida.

EIGHTH: The corporation shall, to the fullest extent permitted by the provisions of the laws of Florida State, as the same may be amended and supplemented, indemnify any and all persons whom it shall have power to indemnify from and against any and all of the expenses, liabilities, or other matters referred to in the laws of the State of Florida, and the indemnification provided for herein shall not be deemed exclusive of any other rights to which those indemnified

may be entitled under any Bylaw, agreement, vote of stockholders or disinterested directors or otherwise, both as to action in his official capacity and as to action in another capacity while holding such office, and shall continue as to a person who has ceased to be director, officer, employee, or agent and shall inure to the benefit of the heirs, executors, and administrators of such a person.

NINTH: From time to time any of the provisions of this certificate of incorporation may be amended, altered, or repealed, and other provisions authorized by the laws of the State of Florida at the time in force may be added or inserted in the manner and at the time prescribed by said laws, and all rights at any time conferred upon the stockholders of the corporation by this certificate of incorporation are granted subject to the provisions of this Article NINTH.

Signed on May 19, 1997.

Suan G. Francis Susan G. Francis - Incorporator

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

I. The name of the	corporation is B&F Rehab Consultants, In)C.
2. The name and ad	dress of the registered agent and office is:	
	Susan G. Francis	30 9 M
	(NAIGE)	Les U
	4410 N.W. 113th Terrace	# 8 T
	(P. O. Box or Mall Drop Box (107 ACCEPTABLE)	Sign
	Coral Springs, Florida 33065	SSEE'E MIN
	(CITY/STATE/ZE)	PHI 12: 23
o act in inis capacity and complete perform is registered again.	as registered agent and to accept service of process for the above sed in this certificate, I hereby accept the appointment as registered. I further agree to comply with the provisions of all stantes related accept the obligation of my duties, and I am familiar with and accept the obligation	l ageni and agree ting to the proper vis of my position
I hereby co	an familier with and accort the sun G. founds (423)?	ditties and
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	(CATE)	

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314