890 S.W. 87 AV 500002235865--4 07/11/97--01058--010 ****122.50 ****122.50 MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Phone # LOCAL REPRESENTATIVE TALLAHASSEE Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. MERCY PULMUNARY REHABILITATION CENTER

(Corporation Name)

(Corporation Name)

(Corporation Name)

(Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy (1) Signature Walk in Pick up time 2.00 Certificate of Shines Will wait Photocopy Mail out EAMENDMENTS: NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal **Domestication** Other Merger OTHEREILINGS REGISTRATION/ OUALIRICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials. CR2E031(1/95)

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE | NAME

The name of the corporation shall be:

MERCY PULMUNARY REHABILITATION CENTER, INC.



ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12107 SOUTH BAYSHORE DRIVE SUITE #402 MIAMI, FLORIDA 33131

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANA L. RAMIREZ 28201 S.W. 134 PLACE MIAMI, FL 33033-0000

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ANA L. RAMIREZ 28201 S.W. 134 PLACE MIAMI, FL 33033 DIRECTOR

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ANA L. RAMIREZ 28201 S.W. 134 PLACE MIAMI, FL 33033 DIRECTOR

> Articles of Incorporation Filing Fee - \$36

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.

he name and address o	f the registered agent and office is:
ANA L. RAMIREZ	
	(NAME)
28 201 54 (P.O	BOX NOT ACCEPTABLE)
MIAMI, FLORIDA	33 0 3 3

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

DATE

REGISTERED AGENT FILING FEE: \$35,00