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Mr. Gil Lukat 537 AIA Satellite Beach, FL. 32937

July 21, 1997

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

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Gentlemen:

Enclosed are the Articles of Incorporation for Riverside Outpatient Rehabilitation Center, Inc. together with the acknowledgment of registered agent.

Also enclosed is our check for \$122.50 for the required filing fees.

The FEIN is 59-3456984.

Please return the original certified Articles to 537 A1A, Satellite Beach, FL. 32937.

Thank you for your assistance.

Sincerely,

Gil Lukat Incorporator

GL/s Enclosure 97 JUL 23 PH 3-31
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

RIVERSIDE OUTPATIENT REHABILITATION CENTER, INC.

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 I NAME

The name of the corporation shall be:

RIVERSIDE OUTPATIENT REHABILITATION CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

537 A1A Satellite Beach, FL. 32937

ARTICLE III CAPITAL STOCK

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

7500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Gil Lukat: 537 A1A, Satellite Beach, FL. 32937

ARTICLES VI INCORPORATOR (S)

The name (s) and street address (es) of the Incorporator (s) to these Articles of Incorporation is (are): Gil Lukat, 537 Satellite Beach, FL. 32937.

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this

2) day of 500, 1997.

Signature (s) of Incorporator

CERTIFICATE DESIGNATING 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: Riverside Outpatient Rehabilitation Center, Inc.
- 2. The name and address of the registered agent and office is: Gil Lukat, 537 A1A Satellite Beach, FL. 32937.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE 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.

TURE (REGISTERED AGENT)