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• LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16

Address

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. NEW AGE REHABILITATIVE SERVICES, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #) 200002283762--7
-09/03/97--01037--012
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4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SEP 3

BSB

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FBI
TALLAHASSEE

ARTICLES OF INCORPORATION
OF
NEW AGE REHABILITATIVE
SERVICES, INC.

THE UNDERSIGNED INCORPORATORS, FOR THE PURPOSE OF FORMING
A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT
HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION:

ARTICLE I

THE NAME OF THE CORPORATION SHALL BE:

NEW AGE REHABILITATIVE SERVICES, INC.

ARTICLE II

THE GENERAL NATURE OF THE BUSINESS AND THE OBJECTS AND PURPOSES
PROPOSED TO BE TRANSACTED AND CARRIED ON, ARE TO DO ANY AND ALL OF THE
THINGS LAWFUL UNDER THE LAWS OF THE STATE OF FLORIDA, AND ANY OTHER
STATE, MUNICIPALITY AND/OR TERRITORIES OF THE UNITED STATES OF AMERICA, AS
FULLY AND TO THE SAME EXTENT AS NATURAL PERSONS MIGHT DO.

- A. TO BUY, SELL, MARKET, DISTRIBUTE ITEMS OF EVERY TYPE AND NATURE,
INCLUDING BUT NOT LIMITED TO ANY MARKETABLE PRODUCT OR ITEM
WHETHER PRODUCED BY THE CORPORATION OR BY OTHERS.
- B. TO PROVIDE REHABILITATIVE SERVICES TO THE COMMUNITY AT LARGE, TO
INCLUDE, BUT NOT LIMITED TO DIAGNOSTIC; THERAPEUTIC AND RESTORATIVE
SERVICES. TO SERVICE TO INCLUDE, BUT NOT LIMITED TO, PHYSICAL
THERAPY, PHYSICIAN SERVICES, OCCUPATIONAL THERAPY, SPEECH THERAPY,
RESPIRATORY THERAPY, PSYCHOLOGICAL SERVICES, NURSING SERVICES,
PROSTHETIC SERVICES, ORTHOTIC SERVICES, DRUGS AND BIOLOGICAL,
DURABLE MEDICAL EQUIPMENT, AND/OR ANY OTHER RELATED HEALTH OR
MEDICAL SERVICES.

- C. TO PURCHASE, TAKE AND LEASE, OR IN EXCHANGE, HIRE OR OTHERWISE ACQUIRE ANY REAL OR PERSONAL PROPERTY, RIGHTS OR PRIVILEGES SUITABLE OR CONVENIENT FOR ANY OF THE PURPOSES OF THIS BUSINESS, AND TO PURCHASE, ACQUIRE, ERECT AND CONSTRUCT, MAKE IMPROVEMENTS OF BUILDINGS OR MACHINERY, STORES OR WORKS, INsofar AS THE SAME MAY BE APPURTENANT TO OR USEFUL FOR THE CONDUCT OF THE BUSINESS AS ABOVE SPECIFIED.
- D. THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF STOCK OF THIS CORPORATION SHALL BE **ONE HUNDRED (100)** SHARES OF COMMON STOCK HAVING A PAR VALUE OF **ONE DOLLAR (\$1.00)** EACH, FULLY PAID AND NON-ASSESSABLE, ALL OF WHICH SHALL BECOME COMMON STOCK, AND THE SAME SHALL BE ISSUED AND SOLD FOR SUCH CONSIDERATION AS MAY BE FIXED BY THE BOARD OF DIRECTORS, AND SUCH SHARES OF STOCK SHALL BE ISSUED, SOLD OR TRANSFERRED IN ACCORDANCE WITH THE BY-LAWS OF THE CORPORATION.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION SHALL BEGIN BUSINESS SHALL BE **ONE HUNDRED DOLLARS (\$100.00)**

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE.

ARTICLE VI

THE PRINCIPAL OFFICE OF THIS CORPORATION SHALL BE:
**5384 W 16th AVENUE
HIALEAH, FL 33012**

ARTICLE VII

THE MAILING ADDRESS OF THIS CORPORATION SHALL BE:
5384 W 16th AVENUE
HIALEAH, FL 33012

ARTICLE VIII

THE RESIDENT AGENT OF THE CORPORATION AND ITS ADDRESS SHALL BE:
MARIA CUIEL
5384 W 16th AVENUE
HIALEAH, FL 33012

THE BOARD OF DIRECTORS, IN ITS DISCRETION, MAY REPLACE ITS RESIDENT AGENT AT ANY TIME, WITH SUCH REPLACEMENT TO BE EFFECTIVE UPON NOTICE OF SUCH REPLACEMENT BEING FILED WITH THE SECRETARY OF STATE.

ARTICLE IX

THE BUSINESS AND AFFAIRS OF THE CORPORATION SHALL BE CONDUCTED BY THE BOARD OF DIRECTORS OF NOT LESS THAN ONE (1) NOR MORE THAN FIVE (5), IN ACCORDANCE WITH THE BY-LAWS TO BE ADOPTED BY THE BOARD OF DIRECTORS WHICH ARE NOT IN CONFLICT WITH THE PROVISIONS OF THESE ARTICLES OF INCORPORATION.

ARTICLE X

THE NAMES AND ADDRESSES OF THE OFFICERS AND THE FIRST BOARD OF DIRECTORS OF THIS CORPORATION WHO SHALL HOLD OFFICE FOR THE FIRST YEAR OF ITS EXISTENCE, OR UNTIL THEIR SUCCESSORS ARE ELECTED AND QUALIFIED, ARE AS FOLLOWS:

ORESTE ALONSO
5384 W 16th AVENUE
HIALEAH, FL 33012

DIRECTOR/PRESIDENT/TREASURER

MARIA CUIEL
5384 W 16th AVENUE
HIALEAH, FL 33012

DIRECTOR/VICE-PRESIDENT/SECRETARY

ARTICLE XI

THE NAMES AND POST OFFICE ADDRESSES OF THE SUBSCRIBERS TO THIS CERTIFICATE OF INCORPORATION, AND THE NUMBER OF SHARES EACH AGREES TO TAKE, AND THE CONSIDERATION THEREFORE, THE PROCEEDS OF WHICH WILL AMOUNT TO AT LEAST ONE HUNDRED DOLLARS (\$100.00) ARE AS FOLLOWS:

<u>NAME AND ADDRESSES</u>	<u>SHARES</u>	<u>CONSIDERATION</u>
ORESTE ALONSO 5384 W 16th AVENUE HIALEAH, FL 33012	30	\$30.00
MARIA CURIEL 5384 W 16th AVENUE HIALEAH, FL 33012	30	\$30.00
RAFAEL ROLANDO GONZALEZ 5384 W 16th AVENUE HIALEAH, FL 33012	40	\$40.00

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBE TO THIS CERTIFICATE OF INCORPORATION AT THE CITY OF MIAMI, FLORIDA, THIS 26TH DAY OF AUGUST, 1997, FOR THE USES AND PURPOSES AFORESAID.

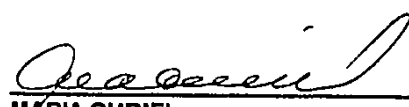


ORESTE ALONSO

MARIA CURIEL

RAFAEL ROLANDO GONZALEZ

I, THE UNDERSIGNED, HEREIN ACCEPT THE APPOINTMENT AS REGISTERED AGENT



MARIA CURIEL
5384 W 16th AVENUE
HIALEAH, FL 33012

CERTIFICATE OF DESIGNATION

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:

- 1 THE NAME OF THE CORPORATION IS:
NEW AGE REHABILITATIVE SERVICES, INC.
- 2 THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

MARIA CURIEL
5384 W 16th AVENUE
HIALEAH, FL 33012

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SIGNATURE


ORESTE ALONSO

TITLE **PRESIDENT**

DATE **AUGUST 26th, 1997**

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


MARIA CURIEL

DATE **AUGUST 26th, 1997**