

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

P980000044540

Oscula Rehabilitation,
Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY 18 AM 11:01

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-05/18/98--01004--011
****122.50 ****122.50

Signature _____

Requested by: 23

Name _____

Date 5/18/98

Time 8:45

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

RECEIVED
98 MAY 18 AM 9:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RP
05/18/98

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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The undersigned, acting as Incorporators of a corporation for profit under the Florida Corporation Act, as set forth in Chapter 617 of the Florida Statutes, adopt the following Articles of Incorporation:

607

1. NAME:

The name of the corporation is: OSCEOLA REHABILITATION, INC.

2. PRINCIPAL OFFICE/MAILING ADDRESS:

The street address and mailing address of the initial principal office is:

903 N. Central Ave.
Kissimmee, FL 34741

3. SHARES:

The number of shares the corporation is authorized to issue is 1,000 shares.

4. INITIAL REGISTERED OFFICE AND AGENT:

The name and street address of the initial registered agent and office of this corporation is:

Dr. Roberto Arias
903 N. Central Ave.
Kissimmee, FL 34741

5. INCORPORATORS:

The names and addresses of each Incorporator is:

Dr. Roberto Arias
903 N. Central Ave.
Kissimmee, FL 34741

Vrajlal L. Rajyaguru, M.D.
903 N. Central Ave.
Kissimmee, FL 34741

6. DIRECTORS:

The board of directors shall consist of two (2) directors.

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The names and addresses of the initial directors are:

Dr. Roberto Arias
903 N. Central Ave.
Kissimmee, FL 34741

Vrajlal L. Rajyaguru, M.D.
903 N. Central Ave.
Kissimmee, FL 34741

7. **PURPOSE:**

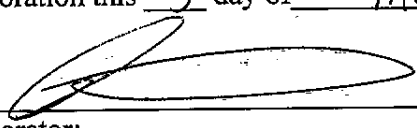
The purpose of this corporation is to provide rehabilitation and medical services.

8. **PAR VALUE:**

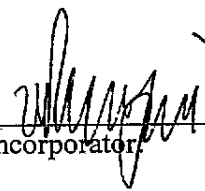
The par value for the authorized shares or classes of shares is:

\$1.00 per share

IN WITNESS WHEREOF, the undersigned Incorporators have executed these Articles of Incorporation this 5 day of MAY, 1998.

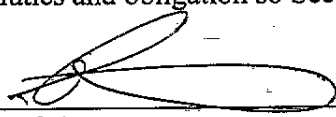


Incorporator:



Incorporator:

Having been named as registered agent for the above-stated corporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I accept the duties and obligation so Section 607.0505, Florida Statutes (1995).



Registered Agent: