## P988000055364

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

Tallahassee, FL 32314			<u>.</u> د
SUBJECT:	Rehab City (Proposed corpo	Tnc.  prate name - must include sur	ffix)
		8	0000256415 -06/18/980105: *****78.75 ***
Enclosed is an original a	and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM: _	Wilbert Name (	Brimm Jr Printed or typed)	
2760 Somerset Dr. 5-309 Address			
<u></u>	Lauderclale Lo	Kes Fla.	33311
_	954 486 - Daytime	7818 Telephone number	<del></del>

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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

NAME ARTICLE I

The name of the corporation shall be:

Rehab City Inc.

ARTICLE II PRINCIPAL OFFICE

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

2760 Somerset Dr. 5-309 Lauderdale Lakes, Fla. 33311

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5,000 Five Thousand shares of Ten Dollars par value common stock

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Wilbert Brimm Jr.

2760 Somerset Dr. S-309

Lauderdale Lakes, Fla. 33311

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Rehab City Inc. 2760 Somerset Dr. 5-309

Lauderdale Lakes, Fla. 33311

Kehab City Inc. Willet Brimen.
Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent