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CHILDS PLAY PHYSICAL THERAPY, INC.
P O BOX 51104
TICE, FLORIDA 33994-51104

July 23, 1998

Corporate Records Bureau
Division of Corporations
Department of State
P O Box 6327
Tallahassee, FL 32301

Dear Sir or Madam:

As Incorporator of the above named corporation, I am requesting a Charter from the State of Florida in order to start a business as a corporation in Florida.

Enclosed are the following papers, together with our check:

a. Original and one copy of Certificate of Incorporation for filing and approval by your office;

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-07/27/98-I01129--013
****122.50 ****122.50

b. Certificate of Registered Agent;

c. Check to cover fees and costs in the amount of $122.50.

$35.00 to file Certificate
$52.50 for certified copy
$35.00 for Registered Agent Designation

Please return the certified copy as soon as possible.

Very truly yours,
CHILDS PLAY PHYSICAL THERAPY, INC.

Wendy Sams MSPT

Wendy Sams
Incorporator

enclosure

FILED
98 JUL 27 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7-30-98

ARTICLES OF INCORPORATION

OF

CHILDS PLAY PHYSICAL THERAPY , INC.

FILED
98 JUL 27 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I. CORPORATION NAME

The name of the corporation is:

CHILDS PLAY PHYSICAL THERAPY, INC.

The address of the corporation is:

2202 ISLE OF PINES
FORT MYERS, FLORIDA 33905

The mailing address of the corporation is:

P O BOX 51104
TICE, FLORIDA 33994-51104

ARTICLE II. NATURE OF BUSINESS AND POWERS

The general nature of the business to be transacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III. CAPITAL STOCK

The maximum number of share of stock that this Corporation is authorized to issue and have outstanding at any one time is 1,000 shares of common stock with a par value of $1. (one dollar) per share.

ARTICLE IV. TERM OF EXISTENCE

This corporation shall have perpetual existence commencing upon issuance of the certificate of incorporation from the Secretary of State.

ARTICLE V. REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be:

WENDY SAMS
2202 ISLE OF PINES
FORT MYERS, FLORIDA 33905

The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VI. BOARD OF DIRECTORS

This Corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be less than one.

ARTICLE VII. INITIAL DIRECTORS

The name of the initial director of this Corporation and the street address is:

WENDY SAMS
2202 ISLE OF PINES
FORT MYERS, FLORIDA 33905

The persons named as the initial directors shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE VIII. INCORPORATOR

The name and address of the person signing these Articles of Incorporation as the INCORPORATOR is:

WENDY SAMS
2202 ISLE OF PINES
FORT MYERS, FLORIDA 33905

ARTICLE IX. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders meeting by at least a majority of the stockholders entitled to vote, unless all of the directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned, as INCORPORATOR, has executed the foregoing Articles of Incorporation on this 23 day of July, 1998

Wendy Sams MS, PT
WENDY SAMS
INCORPORATOR

BEFORE ME, a Notary Public, personally appeared WENDY SAMS , known to be the person described as INCORPORATOR, and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to these Articles of Incorporation on this 23rd day of July, 1998

My commission expires:

Eleanor Jane Funk
NOTARY PUBLIC
Eleanor Jane Funk
My Commission CC688023
Expires October 12, 2001

I hereby am familiar with and accept the duties and responsibilities as Registered Agent for CHILDS PLAY PHYSICAL THERAPY, INC.

Wendy Sams MS, PT
WENDY SAMS
REGISTERED AGENT

BEFORE ME, a Notary Public, personally appeared WENDY SAMS, to me known to be the person described as Registered Agent and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS, my hand and official seal this 23rd day of July, 1998

My Commission Expires:

Eleanor Jane Funk
NOTARY PUBLIC

Eleanor Jane Funk
My Commission CC688023
Expires October 12, 2001

CHILDS PLAY PHYSICAL THERAPY, INC.
MAILING ADDRESS: P O BOX 51104, TICE, FLORIDA 33994-51104

PHYSICAL LOCATION: 2202 ISLE OF PINES
FORT MYERS, FLORIDA 33905

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted:

First: That CHILDS PLAY PHYSICAL THERAPY, INC. is desiring to organize or qualify under the law of the State of Florida with its principal place of business at 2202 ISLE OF PINES, CITY OF FORT MYERS, STATE OF FLORIDA, 33905, mailing address: P O Box 51104, Tice, Florida 33994-51104, has named WENDY SAMS, located at 2202 ISLE OF PINES, FORT MYERS, FLORIDA 33905 as its agent to accept service of process within Florida.

Wendy Sams MA,PT
WENDY SAMS
PRESIDENT

7-23-98
DATE

Having been named to accept service of process for the above state corporation, at the place designated in this certificate, 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.

Wendy Sams MA,PT
WENDY SAMS
REGISTERED AGENT

7-23-98
DATE

FILED
98 JUL 27 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA