ZARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Pick up time 200 Certified Copy Walk in Certificate of Status Will wait Mail out Photocopy

| | NEW FILINGS |
|---|-------------------|
| X | Profit |
| | NonProfit |
| | Limited Liability |
| | Domestication |
| | Other |

| e odska | OTHER FILIGS |
|---------|------------------|
| | Annual Report |
| | Fictitious Name |
| | Name Reservation |

| AMENDMENTS |
|---------------------------------------|
| Amendment |
| Resignation of R.A., Officer/Director |
| Change of Registered Agent |
| Dissolution/Withdrawal |
| Merger / |

| QUALIFICATION |
|---------------------|
| Foreign / |
| Limited ⊭artnership |
| Reinstatement |
| Trademark |
| Other |

DIVISION OF CORPORATION 38 SEP 30 AM 10: 56.

BECEINED

Examiner's Initials

ARTICLES OF INCORPORATION

98 SEP 30 PH 12: 49
SECRETARY OF STATE
TALLAHASSEE TO GRIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incomperation.

ARTICLE 1 NAME

The name of the corporation shall be:

TWELTH AVE. REHABILITATION CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

101 NW 124 AVE MIAMI, FLORIDA 33128

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANCES PHAU 9300 SUNRISE LAKE BLUD SUNRISE, FLORIDA 33377

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ARNOLD FREEMAN 232 HILLSPOINT ROAD WESTPORT CT 06880

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ARNOLD FREEMAN (P) 232 HILLSPOINT NOAD WESTPORT CT 06880

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 29 day of 360, 1998.

Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION 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.

| and address | of the registered agent a | AUE. REHATSILI TER, INC |
|---------------------|-------------------------------|----------------------------|
| 18 hame and address | PS PHAU | |
| 1002000 | ES PHAU (NAME) | · · · |
| 1200 | SUNRISE 4 | AKE 19100 |
| (P | O. BOX NOT ACCEPTABLE FLORE & | LE) |

PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS RECISTERED 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 INFEGISTERED AGENT.

SIGNATURE Trace phase

DATE 7/28/98

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REGISTERED AGENT FILING FEE: \$35.00

98 SEP 30 PM I2: 49
SECRETARY OF STATE
TALLAHASSEE FLORIDA