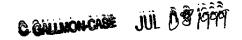
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Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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	ke-ability Oran	ge city, inc.	
SUBJECT:	_		7. S.
	(Proposed corpo	rate name - must include suf	FILED JUL -2 PM 4: CRETARY OF STA LLAHASSEE, FLOR
Enclosed is an origin	nal and one(1) copy of the article	s of incorporation and a c	heck for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Haliczer, Pettis & Wl		James S. Haliczer
Name (Printed or typed) Sixth Floor, 101 NorthEast 3rd Avenue Address			
	(954) 523-9922	elephone number	-



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.

ARTICLE I NAME

The name of the corporation shall be:

Re-ability Orange City, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1117 Saxon Blvd.

Orange City, Fl. 32763

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Sally Darlin

1117 Saxon Blvd. Orange City, Fl. 32763

<u>ARTICLE V INCORPORATOR</u>

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

Sally Darlin

1117 Saxon Blvd. Orange City, Fl. 32763

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

Date