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ARISE REHABILITATION SERVICES, INC.

c/o A A Ali, CPA
1322 North Pine Hills Road
Orlando, Florida 32808

November 23, 1999

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-11/29/99--01134-015
****157.50 *****78.75

Secretary of State
Division of Corporation
409 East Gaines Street
Tallahassee, Fl 32399

Re: ARISE REHABILITATION SERVICES, INC.

Gentlemen:

Enclosed, please find Articles of Incorporation for *Arise Rehabilitation Services, Inc.* and our check in the amount of $78.75.

This represents the cost of the filing fees, Certificate of Status and fee for Registered Agent Designation for the above named corporation.

Very truly yours,

AA/ea
Enclosures

FILED
99 NOV 29 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
99 NOV 29 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

of

## ARISE REHABILITATION SERVICES, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

### ARTICLE I - CORPORATE NAME

The name of the corporation is:
**Arise Rehabilitation Services, Inc.**
**309 Sterling Lake Drive, Ocoee, FL 34761**

### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One) Dollar(s) ($1.00) par value Common Stock, which shall be designated "Common Shares."

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agents of this Corporation is:

Name: Nilsa Charles

Address: 309 Sterling Lake Drive

City: Ocoee, Florida Zip 34761

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name: Nilsa Charles, President

Address: 309 Sterling Lake Drive

City: Ocoee, FL 34761

## ARTICLE VII - INCORPORATORS

The name and address of the person(s) signing these articles of Incorporation are as follows:

Name: Nilsa Charles, President

Address: 309 Sterling Lake Drive

City: Ocoee, FL 34761

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 24TH day of NOVEMBER, 1999.

Linda Charles (Seal)

_____ (Seal)

_____ (Seal)

STATE OF FLORIDA
COUNTY OF ORANGE

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

DL C642-630-58-636-0

_____

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that they executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 24TH day of NOVEMBER, 1999.

(Notary Seal)

NOTARY PUBLIC - STATE OF FLORIDA
N. WILLIAMS-BRYAN
COMMISSION # CC750138
EXPIRES 6/10/2002
BONDED THRU ASA 1-888-NOTARY1

Notary Public, State of Florida at Large)

My commission expires: 06-10-2002

## CERTIFICATE AND ACKNOWLEDGEMENT

## OF REGISTERED AGENT

FILED
99 NOV 29 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF REGISTERED AGENT**
**OF**
**ARISE REHABILITATION SERVICES, INC.**

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

At: 309 Sterling Lake Drive

Ocoee, FL 34761

Has named Nilsa Charles

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

**ACKNOWLEDGEMENT**

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(Registered Agent