N960MOS/SO

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

SUBJECT:	Them	Tight (C) (Proposed corpora	Sunty Rosent ate name - must include su	5 Support	<u>6000</u>
					to green die 1
Enclosed is ar	original and o	one(1) copy of the	he articles of incorpor	ation and a check for	:
		\$78.75 Filing Fee & Certificate		\$131.25 Filing Fee, Certified Copy & Certificate	
FROM: WANDA E JONES Name (Printed or typed)					
	701	Byant	AVENUE Address		
		• •	34994 ty, State & Zip		hu/IG

NOTE: Please provide the original and one $co_{P_{\sigma}}$ of the articles.

Daytime Telephone number

(401) 287-7077

ARTICLES OF INCORPORATION

The undersigned, acting as incorpor— '(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I

The name of the corporation shall be:
The mouth County Parents Support Group Inc

ARTICLE II

Principal place of business and mailing address

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

701 Bryant Avenue Stuart FL 34994 FILED

95 JUN 12 AN 9: 57

PROPERTY SEE, FLORIDA

ARTICLE III

Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):

Children who are demonstrating unacceptable behavior.

ARTICLE IV

Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

Over noted in.

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes. unless limited are as follows:

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is: WARKL E JONES

701 Bryant Cuenue Stuart FL 34994

ARTICLE VII

Incorporators

The name(s) and the street address es) of the incorporator(s) for these articles of incorporation is(are):

Warda E Jeres 701 Byant Avenue Stract FL 34994

The undersigned incorporator has executed these Articles of Incorporation this day of ____ _____, 19 <u>५७</u> .

Signature of Incorporator:

Harda E bres Wand E Ines
Typed name of incorporator signing

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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.

라고 용

1. The name of the corporat		JUN 12 ALLANIASSEE
The martin Co.	antly Porents Support	T Grow Tit
	(must include suffix)	57 57
2. The name and address of	the registered agent and office is:	
War	NOA E Janes	
	(Name)	
Hot (Buyant Alenue	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE	E)
Stro	rt FL 34994	
	(CITY/STATE/ZIP)	

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.

Nanda E Jones	5/29/96
(SIGNATURE)	(Date)