BYRON P. HILEMAN, P.A.

ATTORNEY AT LAW
COLONIAL SQUARE BUILDING
65 THIRD STREET, N.W., SUITE 201
WINTER HAVEN, FLORIDA 33881

MAIL TO: P.O. DRAWER 9479 WINTER HAVEN, FL 33883-9479

PHONE: (941) 299-4883 FAX: (941) 299-0935

July 23, 1997

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

300002247733--2 -07/25/97-01050-008 *****87.50 *****87.50

Re: Change of Name of Corporation
Tri-County Alcoholism Rehabilitative Services, Inc.
to Tri-County Addictions Rehabilitation Services, Inc.

Dear Secretary of State:

Enclosed herewith is the original Amended and Restated Articles of Incorporation of Tri-County Addictions Rehabilitation Services. Also enclosed is a check in the amount of \$87.50 which represents a filing fee (\$35.00) and certified copy (\$52.50) request with copy of Articles for certification.

Should there be any questions, please call. Thank you for your assistance in this matter.

Sincerely,

Irene Berkenfield Legal Assistant to:

BYRON P. HILEMAN

Serkenfield

:ib enclosure cc: file

1911-17683

vs NOV 1 7 1997

amended & Restated & N/c



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 4, 1997

BYRON P. HILEMAN P.O. DRAWER 9479 WINTER HAVEN, FL 33883-9479

SUBJECT: TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, INC.

Ref. Number: 737117

We have received your document for TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate must accompany the Restated Articles of Incorporation setting forth one of the following statements: (1) The restatement was adopted by the board of directors and does not contain any amendments requiring member approval; OR (2) If the restatement contains an amendment requiring member approval, the date of adoption of the amendment by the members and a statement that the number of votes cast for the amendment was sufficient for approval.

Please correct the date the articles were originally filed in the first paragraph of your document, see print out attached.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

If you have any questions concerning the filing of your document, please call (850) 487-6909.

Velma Shepard Corporate Specialist

Letter Number: 297A00039501

AUG 07 1997 Lecenced

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

BYRON P. HILEMAN, P.A. ATTORNEY AT LAW COLONIAL SQUARE BUILDING 65 THIRD STREET, N.W., SUITE 201 WINTER HAVEN, FLORIDA 33881

MAIL TO: P.O. DRAWER 9479 WINTER HAVEN, FL 33883-9479 PHONE: (941) 299-4883 FAX: (941) 299-0935

September 26, 1995

Ms. Velma Shepard Corporate Specialist Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Subject Tri-County Addictions Rehabilitation Services Inc.

Name Change: Tri-County Human Services Inc.

Ref Number: 737117

Letter Number: 297A00039501

Dear Ms. Shepard:

Enclosed are two (2) Amended and Restated Articles of Incorporation of Tri-County Addications Rehabilitation Services, Inc. for filing with the requested changes:

1) Page One to show date of October 22, 1976.

2) Last Page - Certificated Designating Service of Process

3) Minutes of Tri-County Meeting March 20, 1997 Refur Ned Page Two regarding Name Change approval

I am also enclosing copy of my first letter with copy of your letter and note. I hope this is sufficent for filing. Should there be any questions, please let me know. Thank you for your assistance in this matter.

Sincerely,

Irene Berkenfield
Legal Assistant to:

BYRON P. HILEMAN

:ib enclosures with stamped address envelope for return of certified copy



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 3, 1997

IRENE BERKENFIELD P.O. DRAWER 9479 WINTER HAVEN, FL 33883-9479

SUBJECT: TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, INC. Ref. Number: 737117

We have received your document for TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

X

A certificate must accompany the Restated Articles of Incorporation setting forth one of the following statements: (1) The restatement was adopted by the board of directors and does not contain any amendments requiring member approval; OR (2) If the restatement contains an amendment requiring member approval, the date of adoption of the amendment by the members and a statement that the number of votes cast for the amendment was sufficient for approval.

Please accept our apology for failing to mention this in our previous letter.



A specific person or an active corporation must be listed as the register agent. Please correct article !! of your document accordingly.

Minutes are not filed with the Division of Corporations and should be kept with the records of the corporation. Any changes that are being made to the articles of incorporation can be made by filing articles of amendment. Enclosed is an amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6909.

Velma Shepard Corporate Specialist

Letter Number: 697A00048663

Rec d 11/14

BYRON P. HILEMAN, P.A. ATTORNEY AT LAW COLONIAL SQUARE BUILDING 65 THIRD STREET, N.W., SUITE 201 WINTER HAVEN, FLORIDA 33881

MAIL TO: P.O. DRAWER 9479 WINTER HAVEN, FL 33883-9479

PHONE: (941) 299-4883

FAX: (941) 299-0935

November 12, 1997

Velma Shepard Corporate Specialist Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Tri-County Addictions Rehabilitations Services, Inc.

Ref. Number: 737117

Dear Ms. Shepard:

Enclosed herewith (hopefully for the last time) is the Amended and Restated Articles of Incorporation of Tri-County Addictions Rehabilitation Services, Inc. I have enclosed the original and one copy with the proper first page name change in Article II and the Certificate of Statement for Restated Articles of Incorporation. Also enclosed is a stamped addressed envelope for the return of the certified copy.

Thank you for all of your assistance and I would appreciate your prompt attention to this matter.

Yours truly,

Irene Berkenfield

Legal Assistant to:

BYRON P. HILEMAN

Lerkenfield

:ib

enclosures

cc: file

AMENDED AND RESTATED ARTICLES OF INCORPORATION OF TRI-COUNTY ADDICTIONS REHABILITATIVE SERVICES, INC. SECRETARY OF STATE (A Corporation Not For Profit) FILED 97 NOV 14 PM 1: 17 TALLAHASSEE FLORIDA

The following Amended and Restated Articles of Incorporation, duly adopted pursuant to the authority and provisions of Chapter 607 and 617 of the Florida Statutes, and the existing Articles of Incorporation and By-laws of Tri-County Addictions Rehabilitative Services, Inc., supersede and take the place of such existing Articles of Incorporation which were filed with the Secretary of State on October 22, 1976.

BE IT RESOLVED that the Articles of Incorporation of Tri-County Addictions Rehabilitative Services, Inc., a Florida not-for-profit corporation, be and the same are hereby amended to read as follows:

ARTICLE I

The name of this corporation is: TRI-COUNTY HUMAN SERVICES, INC.

ARTICLE II

OFFICE AND REGISTERED AGENT

The corporation shall have and continuously maintain in Winter Haven, Florida, its principal place of business and a registered agent thereat upon whom process can be served. The address of the registered office is: Tri-County Human Services, Inc., 37 Third Street, S.W., Post Office Drawer 9306, Winter Haven, Florida 33883-9306, and the name of the registered agent in charge thereof is: Casey S. Behrend.

<u>ARTICLE III</u>

PURPOSES OF CORPORATION

The purposes and powers of the corporation are:

A. To establish, obtain financial aid for, and provide an array of human services consistent with the needs of the community.

ARTICLE IV

MEMBERS

Members shall consist of those persons who shall at the time be elected and constitute the Board of Directors.

ARTICLE V

TERMS OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE VI

ADDRESS

The street address of the corporation in the State of Florida is: 37 Third Street, Winter Haven, Florida, 33880. The mailing address is: Post Office Drawer 9306, Winter Haven, Florida, 33883-9306. The Board of Directors may from time to time move the principal office to any other address in Florida, and may establish branch offices in such other place or places as may be designated by the Board of Directors.

ARTICLE VII

OFFICERS

The affairs of the corporation are to be managed by a chairman, vice chairman, secretary, and a treasurer and such other officers as may be provided by the by-laws, who shall be elected at the annual meeting of the Board of Directors. The officers are as follows:

NAME

OFFICE

Mrs. Vida Tomlinson

Chairman

Mrs. Bennie Spanjers

Vice Chairman

Mr. W. D. Wilcox

Secretary

Dr. Wiley Koon

Treasurer

ARTICLE VIII

DIRECTORS

The corporation shall be managed by a board of not less than three directors. The directors are as follows:

Mr. Larry Alumbaugh

Mr. Paul B. Cate

Mr. Joel Evers

Com. James Gose

Mrs. Amy Lawrence

Mrs. Diana Myrick

Dr. David Neal

Mr. Walter Olliff, Jr.

ARTICLE IX

AMENDMENT OF ARTICLES AND BY-LAWS

The Board of Directors shall have the power to adopt, alter and rescind the Articles of Incorporation and the By-Laws by two-thirds (2/3) vote.

ARTICLE X

NONPROFIT CHARACTER

This corporation is one which does not contemplate pecuniary gain or profit to the members, directors or officers. In the event of its dissolution, the residual assets of the corporation will be turned over to one or more organizations which themselves are exempt as organizations described in Sections 501(c) (3) and 170 (c) (2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future Internal Revenue Code, or the federal, state or local government for exclusive public purposes.

ARTICLE XI

Notwithstanding any other provisions of the Certificate of Incorporation, this corporation shall not carry on any other activities not permitted to be carried on by:

(a) a corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code of 1954 or the corresponding provisions of any future United States Internal Revenue Law;

or

(b) a corporation, contributions to which are deductible under Section 170 (c) (2) of the Internal Revenue Code of 1954 or any other corresponding provisions of any future United States Internal Revenue Law.

IN WITNESS WHEREOF, we, the undersigned, have hereunto set our hands and seals this 19th day of June, 1997, for the purpose of amending and restating the Articles of Incorporation of this nonprofit corporation under the laws of the State of Florida, and we hereby made and file in the office of the Secretary of State of the State of Florida these Articles of Incorporation, and certify that the facts herein stated are true.

CHAIRMAN: VIDA A. TOMLINSON

ATTEST:

SECRETARY: W. D. WILCOX

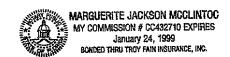
STATE OF FLORIDA COUNTY OF POLK

I HEREBY CERTIFY that on this day before me, a notary public duly authorized in the State and County named above to take acknowledgments, personally appeared VIDA A. TOMLINSON, as Chairman, and W. D. WILCOX, as Secretary, known to me to be the persons described herein and who executed the foregoing Amended and Restated Articles of Incorporation, and they stated before me that they executed the same on behalf of the corporation.

WITNESS my hand and official seal in the County and State named above this 19th day of June, 1997.

My Commission Expires:

(SEAL)



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

IN COMPLAINCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST, THAT TRI-COUNTY HUMAN SERVICES, INC., (NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF WINTER HAVEN, STATE OF FLORIDA, HAS NAMED _____ CASEY S. BEHREND, (Name of Resident Agent) LOCATED AT _____ 37 THIRD STREET, S.W., CITY OF WINTER HAVEN, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE: VIDA TOMLINSON
(CORPORATE OFFICER)

TITLE:	Chairman, Board of	Directors
DATE:	8/29/97	

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

SIGNATURE: Usey Schenl
CASEY S. BEHREND
(RESIDENT AGENT)

DATE: 9-4-97

CERTIFICATE OF STATEMENT FOR RESTATED ARTICLES OF INCORPORATION

IN COMPLIANCE OF FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

THAT: TRI-COUNTY HUMAN SERVICES, INC., (NAME OF CORPORATION)

THIS RESTATEMENT CONTAINS AN AMENDMENT REQUIRING MEMBER APPROVAL OF THE NAME CHANGE FROM TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, INC. TO TRI-COUNTY HUMAN SERVICES, INC.

THE DATE OF ADOPTION OF THE AMENDMENT BY THE MEMBERS WAS APPROVED ON MARCH 20, 1997 TO BE ADOPTED AND EFFECTIVE AS OF JULY 1,1997.

THE NUMBER OF VOTES CAST FOR THE AMENDMENT WAS SUFFICIENT FOR APPROVAL.

(CORPORATE OFFICER)			
TITLE:	Chairman, Board of Directors	_	
YO A TIME	11/7/97		