

103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1473

FILING COVER SHEET
ACCT. #FCA-14

F00000004059

CONTACT: CINDY HICKS

DATE: 7-18-00

300003326293--9

-07/18/00--01035--024

*****78.75 *****78.75

REF. #: 0173.12440

CORP. NAME: TCA - Florida, Inc.

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: _____ | | |

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TALLAHASSEE, FLORIDA

STATE FEES PREPAID WITH CHECK# 8304 FOR \$ 78.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

☒ CERTIFIED COPY ☐ CERTIFICATE OF GOOD STANDING

☐ PLAIN STAMPED COPY

Examiner's Initials _____

00 JUL 18 AM 10:55

RECEIVED

F00-4059

GA 7/20



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 18, 2000

CINDY HICKS
CORPORATE & CRIMINAL RESEARCH
TALLAHASSEE, FL

SUBJECT: TCA-FLORIDA, INC.
Ref. Number: W00000017977

We have received your document for TCA-FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc. Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

ALSO, please supply the R.A. address in Item 9.

And please include a CERTIFICATE OF STATUS from DELAWARE when you return the filing.

AND PLEASE NOTE that we have RETAINED your \$78.75 payment.

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) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 500A00039424

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FILED

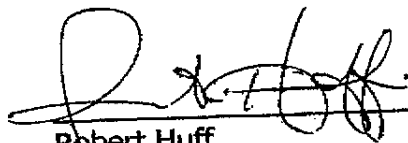
**RESOLUTION ADOPTING FICTITIOUS BUSINESS NAME
DUE TO A CONFLICT OF NAME**

Robert Huff, Executive Vice-President of TCA-Florida, Inc., a corporation duly organized under the laws of the State of California, does hereby certify that the following is a true and correct copy of a resolution of the Board of Directors of said corporation, adopted by written consent on the 18th day of July, 2000.

"RESOLVED, that, this corporation desires to transact business in the State of Florida, and the Board of Directors have been advised that the name of this corporation is not available for use in the State of Florida, this corporation adopts the alternate name California TCA-Florida, Inc. for use in transacting business in the State of Florida pursuant to Section 607.1506, Florida 1989 Business Corporation Act, and

"FURTHER RESOLVED, that the officers of the corporation are hereby authorized and directed to prepare, execute, and file all required documents so that this corporation may obtain a Certificate of Authority pursuant to the Florida 1989 Business Corporation Act, and to make sure this corporation uses the said alternate name in the transaction of business in the State of Florida."

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TALLAHASSEE, FLORIDA


Robert Huff

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. TCA-Florida, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. CALIFORNIA 3. 33-0911043
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 2, 2000 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Approximately 7/31/00
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 18881 Von Karman Avenue, Suite 300
Irvine, CA 92612
(Current mailing address)
8. Addiction Recovery and Counseling
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: National Registered Agents, Inc.
Office Address: 526 E. Park Avenue
Tallahassee, Florida, 32301
(Zip code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

National Registered Agents, Inc.
By: [Signature]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: See attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: See attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert Huff, Secretary

(Typed or printed name and capacity of person signing application)

OFFICER/DIRECTOR RIDER

TCA-FLORIDA, INC.

OFFICERS

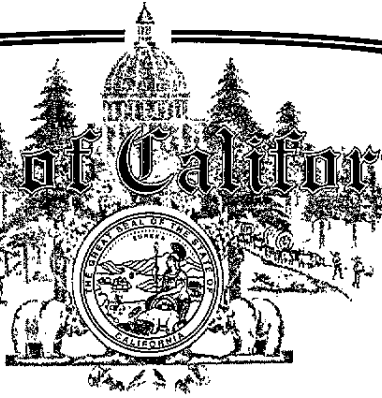
Name	Title	Address
E. Keith Owens	Chairman of the Board, Chief Executive Officer, and Chief Financial Officer	18881 Von Karman Avenue Suite 250 Irvine, CA 92612
Dr. Samuel L. Mayhugh	President	18881 Von Karman Avenue Suite 250 Irvine, CA 92612
Robert Huff	Executive Vice President, Secretary	18881 Von Karman Avenue Suite 250 Irvine, CA 92612

DIRECTORS

Name	Address
E. Keith Owens	18881 Von Karman Avenue Suite 250 Irvine, CA 92612
Dr. Samuel L. Mayhugh	18881 Von Karman Avenue Suite 250 Irvine, CA 92612
Robert Huff	18881 Von Karman Avenue Suite 250 Irvine, CA 92612

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TALLAHASSEE, FLORIDA

State of California



SECRETARY OF STATE CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the **2nd day of June, 2000**, **TCA-FLORIDA, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day
of July 19, 2000.



Bill Jones
BILL JONES
Secretary of State

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