CORPORATION

ACCOUNT NO. : 07210000032

REFERENCE : 586846

4311859

AUTHORIZATION

COST LIMIT :

\$ 70.00

ORDER DATE: November 3, 1997

ORDER TIME: 10:57 AM

ORDER NO. : 586846-010

CUSTOMER NO: 4311859

6000002341416---6

CUSTOMER: Mr. Christian De Berardinis

Haythe & Curley 237 Park Ave. 20th Floor

New York, NY 10017-3142

FOREIGN FILINGS

NAME: RAMSAY YOUTH SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__CERTIFIED COPY

___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jon A Bowling

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.	Ramsay Youth Services Inc. (Name of corporation: must include the word 'INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like import in language as well slearly indicate that it is a company of like important in language.			
	words or abbreviation: must include the words or abbreviations of like import in language person or partnership if not so contained the words.	SUPUANCAS WILL LICALI	v indicate dial il is a chit	RPORATION" or
2.	Delaware	. 3	N/A	
	(State or country under the law of which i	t is incorporated)	(FEI number, if a	ipplicable)
4.	June 18, 1997 (Date of Incorporation)	5.	Perpetual	
	(Date of Incorporation)		(Duration: Year corp. v "perpetual")	vill cease to exist or
6.	Upon filing		= "~a	9 8
	(Date first transacted business in Flori		7.1501, 607.1502, AND	317.155. F.S社 交符
7.	One Alhambra Plaza, Suit	e 750		
				1 75
	Coral Gables, Florida 3	33134		<u> </u>
(Current mailing address)				
8	Manage Health Care Servi	ces		<u> </u>
8. Manage Health Care Services (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)				
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)				
Name: Corporation Service Company				
	Office Address: 1201	Hays Street		
	Tall	ahassee	, Florida,	32301
10. Registered agent's acceptance: (Zip Code)				
cort regi all s	ing been named as registered ag poration at the place designated stered agent and agree to act in the statutes relative to the proper and accept the obligations of my position Corporation Se	in this applicat is capacity. I fur complete perform	ion, I hereby acce ther agree to compl vance of my duties.	pt the appointment as y with the provisions of

By: Acey (A Collect APST. Secondary (Registered agent's signature)

1. Attached is a certificate of existence duly authenticated, not more than 90 days prodelivery of this application to the Department of State, by the Secretary of State of State

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: _____ Bert G. Cibran One Alhambra Plaza, Suite 750. Address: ___ Coral Gables, Florida 33234 Vice Chairman: Carol C lang Address: Director: ___ Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Bert G. Cibran Address: One Alhambra Plaza, Suite 750 Coral Gables, Florida 33234 Vice President: ____ Carol C. Lang Address: (Same as above) Secretary: ______Daniel A Sims Address: (Same as above) Treasurer: Daniel A. Sims Address: (Same as above) NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, pyany officer listed in number 12 of the application)

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

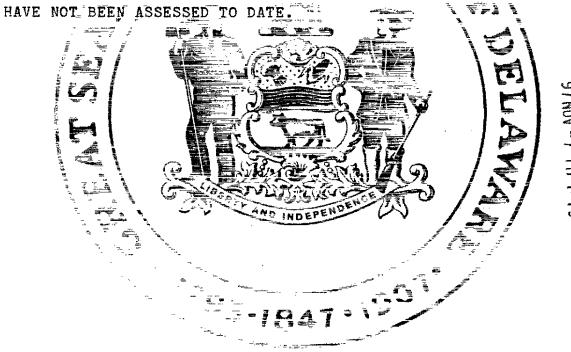
Carol C. Lang, Vice President

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RAMSAY YOUTH SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF NOVEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES





Edward J. Freel, Secretary of State

2763870 8300

971371706

AUTHENTICATION:

8735974

DATE:

11-03-97