M DERAMITAL LATTER CHACK

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

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SEUNETARY OF STATE TALLAHASSEE, FLORIDA

| P. O. Box 6327 Tallahassee, FL 32314 | | TALLMIMOSEE, FEC | | - Lin 10 17 | |
|---|---|--------------------------------------|--|--|--|
| SUBJECT: AS | Sociated Re PROPOSED CORPORATE | COULTY HOMENAME-MUST INCLUDE | nes, In | <u></u> | |
| | | 6 | 00003426 -10/18/00- *****78.75 | 3676 <u>-</u> 9 01058- <u>003</u> *****78.75 | |
| Enclosed is an original | and one (1) copy of the articl | es of incorporation and a | check for: | | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | □\$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate | | |
| ¢ 1 | | ADDITIONAL COP | Y REQUIRED | | |
| FROM: | Ken Mat Clo Cynthia t 1975 E. | helps, Accour Sunrise B Idress | stant, Inc | orporated. Le 758 | |
| Fort Lauder dale, FL 33304 City, State & Zip | | | | | |
| _ | 954-523- Daytime Tel | ephone number | ÷ . | | |
| Cuntha le 1907 | Daytime Tel | ginal and one copy of th | e articles. | | |
| OURSELT ANTICLE | John 10 10 10 10 10 10 10 10 10 10 10 10 10 | ana | Priol | 5/00/ | |
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| The name of the corporation shall be: | T 0 C |
|--|---------------------------------------|
| The name of the corporation shall be: ASSOCIATED RECOVERY Home | 8, -110 |
| ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be P.O. BOX [1041] Mianu, FL 33111 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Halfway house for the recovering homeless, and alcoholical | e: |
| ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: AS Stated per by law S | |
| ARTICLE V INITIAL DIRECTORS OFFICERS The name and addresses: | OO I |
| ARTICLE VI INITIAL REGISTERED AGENT AND STREET AD The name and Florida street address of the registered agent is: Cynthia Phelps, Account ant, Incorporate Rivd., Suite 7 Fort Lauderdale, FL 33304 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Ken Mather 7.0. Box 110411 | rated - FFS PD |
| Miami, FL 33111 | ******** |
| Having been named as registered agent to accept service of process for the above stated in this certificate, I am familiar with and accept the appointment as registered agent and including the balance of the process for the above stated in this certificate, I am familiar with and accept the appointment as registered agent and including the process for the above stated in this certificate, I am familiar with and accept the appointment as registered agent and accept the appointment agent accept the accept the accept the acceptance and accept the acceptance acceptance and acceptance acc | d corporation at the place designated |
| Kon Mather Sirector Signature/Incorporator | $\frac{10/10/00}{\text{Date}}$ |
| returnio mon borano | |

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)