

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:		
Filing Fee Filing Fee & Certificate of Status	U\$78.75 Filing Fee & Certified Copy & Certificate of Status:	
	ADDITIONAL COPY REQUIRED	
FROM: GEOVGIA Funded Name (Printed or typed) S420 Kandy Address		
Orlando Ja 338/1		
Daytime Telephone number		

-11/27/01--01071--003 ******70.00 ******70.00

NOTE: Please provide the original and one copy of the articles.

051A-62895



The undersigned, acting as incorporation(s) of a corporation to chapter 617, Florida Statues. Adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: GEN COUNSELING CENTER INC.
(Please refer to Attachment "A")

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

Principle Place of Business: 104 SOUTH DIVISION AVENUE ORLANDO, FLORIDA 32805

Principle Mailing Address:

P.O. BOX 2566

ORLANDO, FLORIDA 32802

ARTICLE III PURPOSE(S)

The specific purpose for which the corporation is organized are:

Provide all services to all people without regard to race, color, creed, sex. religion, national origin, or physical challenge.

The period of duration of the corporation is perpetual. The specific purpose and purposes for which the corporation are organized are as follows:

GEN COUNSELING CENTER INC.,

Shall provide counseling, social services, assessments, follow-ups, support groups, materials, free literature and an information and referral system.

GEN COUNSELING CENTER INC.,

Shall provide Confidential Counseling which includes marital, divorce, family, groups.

Individuals youth and domestic.

GEN COUNSELING CENTER INC.,

Shall provide Violence Intervention which includes counseling for drug and alcohol addiction, victims of crime, counseling for depression, oppression, suicide, grief counseling, counseling for sexual and spousal abuse, behavorial issues, AIDS Issues, and Eating Disorders, as well as offer a program for Ex-Offenders Program.

GEN COUNSELING CENTER INC.

Shall provide low-ncome housing for the elderly, housing for victims of Spouse Abuse, housing for AIDS patients, housing for runaways as well as housing for alcohol and drug addicted patients.

ARTICLE IV PROGRAM FUNDING

GEN COUNSELING CENTER INC., is funded by federal, state, and local governments, and by private donations and grants

ARTICLE V PROGRAM PHILOSOPHY

GEN COUNSELING CENTER INC. shall promote counseling and social services to communities and individuals through direct contact with businesses and other social service agencies.

ARTICLE VI THE MISSION

GEN COUNSELING CENTER INC., is dedicated to the provision of counseling and support services to families, individuals, and groups in a loving and encouraging environment, to impart hope and effect change.

ARTICLE VII INCORPORATORS

The names and street addresses of the Incorporators of the Articles of Incorporation are:

DR. G.M. DARDEN, EXECUTIVE DIRECTOR 5420 KAREN COURT, ORLANDO, FLORIDA 32811

KAREN BYRD-BURKS, DIRECTOR 7238 PINION DRIVE, ORLANDO, FLORIDA 32818

CELIA SYKES, OFFICE ADMINISTRATOR P.O. BOX 681501. ORLANDO, FLORIDA 32868

ANITA WHITTED, SECRETARY 803 SOUTH IVEY LANE APT G, ORLANDO, FLORIDA 32811

DR. ALVETTA EDWARDS, TRUSTEE 5420 KAREN COURT, ORLANDO, FLORIDA 32811

SAFARIAH MCCRAY, TRUSTEE 1309 SANTA ANITA STREET, ORLANDO, FLORIDA 32808

DR GM DARDEN

And and DR. G.M. DARDEN

Laran Syndamics KAREN BYRD-BURKS

Celia Sixes CELIA SYKES

ANITA WHITTED

ANITA WHITTED

ANITA WHITTED

SAFARIAH MCCRAY

Article VIII

The Directors are elected according to the Bylans.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the corporation is:	Gow Counseling Ce.	nter Inc
2. The name and address of the reg	sistered agent and office is:	
Georiga	Darden (NAME)	OL NOV
5420 Kr	GREN COURT BOX OF MAIL Drop BOX NOT ACCEPTABLE)	HASSEE, OF
Orlando	CITY/STATE/ZIP)	D 1: 23

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.

FURLY (SIGNATURE)

11-27-01 (Date)