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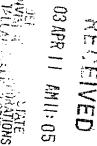
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SEGRETARY OF STATEMENT ALLAHASSEE, FLORICA

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4-11-03

. TRANSMITTAL LETTER

SUBJECT: CULTURAL HOUSE OF CARE THE.

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

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3 \$70.00	□ \$78.75	\$78.75	\$87.50
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NOTE: Please provide the original and one copy of the articles.

ARTICLE I NAME	03 APR 11 AM 11: 12
The name of the corporation shall be: CULTURAL HOUSE OF CARE INC.	SECRETÁRY OF STATE TALL AHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation P.D. BOX 794 422 REED, CARLLE ARTICLE III PURPOSE The purpose for which the corporation is organized is: To provide Shefter and refuge for a due to stress and undesirable units ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed: Appointed By Board	HATTAHOOLHEE, FL.34324
ARTICLE V INITIAL DIRECTORS/OFFICERS	Bainbridge, GA. 31717
ARTICLE VI INITIAL REGISTERED AGENT AND STR	EET ADDRESS
The name and Florida street address of the registered agent is: CLAUDIA SMITH 422 REED ST. CHATAHONHEE, FL. 82334	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: John W.Smith 422 REED ST.	tin em en
**************************************	ove stated corporation at the place designated
n this certificate, I am familiar with and accept the appointment as registered	agent and agree to act in this capacity.

FILED

ARTICLES OF INCORPORATION

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