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(Req	uestor's Name)	
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PICK-UP	TIAW	MAIL
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Certified Copies	Certificates	s of Status
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SECRETAGE OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: South	ern Criminal Ju (PROPOSED CORPORA	stice Consortium TENAME- <u>MUSTINCLU</u> I	DE SUFFIX)
Enclosed is an original a	nd one(1) copy of the arti	cles of incorporation and a	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
		ADDITIONAL CO	PY REQUIRED
FROM: _	Sheri L. Co Name (F	ox Printed or typed)	_
	3736 Highwa		
	· · · · · · · · · · · · · · · · · · ·	Address	
	Jay, Florio	da 32565 State & Zip	- -

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

251-296-0633 Daytime Telephone number

ÀRTICLES OF INCORPORATION

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

ARTICLE I __ NAME

The name of the corporation shall be. Southern Criminal Justice Consortium, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3736 Highway 4

Jay, Florida 32565

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To develop a continuum of services, to promote the well

being of individuals who are adversely affected by substance abuse violence, behavioral or mental disorders while helping assure public starticle IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Elected

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

Dr. Jill Hall - Director of Behavioral Intervention Services Sheri L. Cox - Director of Criminal Justice Services

Gloria Fowler - Director of Educational Services

Karen L. Cox - Financia Director

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Sheri L. Cox 3736 Highway 4 Jay, Florida 32565

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Jill Hall 3736 Highway 4 Jay, Florida 32565

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

in this certificate, I am familiar with and accept the appointment as registered agent and	d agree to act in this capaci	ty.
Their L. Cox	6-17-03	
Signature/Registered Agent	Date	z c vide
(Still Hall	6-17-03	
Signature/Incorporator	Date	<u>.</u>