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(Business Entity Name)

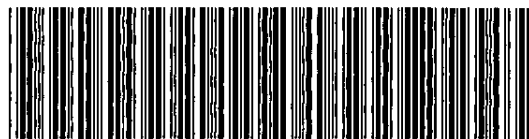
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**COVER LETTER**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 FEB -6 PM 3:50

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

SUBJECT: INSTITUTE FOR ASPERGER'S SYNDROME AND AUTISM  
RESEARCH AND REHABILITATION,  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) INC.

Enclosed is an original and one(1) copy of the Articles 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

**ADDITIONAL COPY REQUIRED**

FROM: CLAUDIA DVORAK  
Name (Printed or typed)

1409 TENDER OAKS LANE  
Address

PENSACOLA, FL 32506  
City, State & Zip

(850) 982-3718  
Daytime Telephone number

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



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DIVISION OF CORPORATIONS

08 FEB -6 PH 3:50

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 28, 2008

CLAUDIA DVORAK  
1409 TENDER OAKS LANE  
PENSACOLA, FL 32506

SUBJECT: INSTITUTE FOR ASPERGER'S SYNDROME AND AUTISM  
RESEARCH AND REHABILITATION, INC.  
Ref. Number: W08000004307

We have received your document for INSTITUTE FOR ASPERGER'S SYNDROME AND AUTISM RESEARCH AND REHABILITATION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 508A00005644

RECEIVED  
08 FEB -6 AM 8:00  
DIVISION OF CORPORATIONS

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

INSTITUTE FOR ASPERGER'S SYNDROME AND AUTISM RESEARCH  
AND REHABILITATION, INC.

## ARTICLE II PRINCIPAL OFFICE

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

1409 TENDER OAKS LANE  
PENSACOLA, FL 32506

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE RESEARCH FOR ASPERGER'S SYNDROME  
DEVELOP REHABILITATION THERAPY FOR ASPERGER'S  
SYNDROME AND AUTISM

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

APPOINTED BY EXECUTIVE DIRECTOR  
AS STATED IN THE BYLAWS

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

CLAUDIA DVORAK, EXECUTIVE DIRECTOR  
1409 TENDER OAKS LANE  
PENSACOLA, FL 32506

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CLAUDIA DVORAK  
1409 TENDER OAKS LANE, PENSACOLA, FL 32506

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLAUDIA DVORAK  
1409 TENDER OAKS LANE, PENSACOLA, FL 32506

\*\*\*\*\*  
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.

Claudia Dvorak  
Signature/Registered Agent

1-23-2008  
Date

Claudia Dvorak  
Signature/Incorporator

1-23-2008  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 FEB -6 PM 3:50