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TRANSMITTAL LETTER

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

	(Proposed corporal	for Holistic Services, Inc. te name - must include suffix) FOUR 344276-1 -11/12/9701035002 ******78.75 ******78.75	
\$70.00	\$78.75	□\$122.50 □\$131.25 呈剂 으 □	
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	& Certificate	S122.50 S131.25 Filing Fee Filing Fee, Certified Copy & Certificate S	
		ADDITIONAL COPY REQUIRED 28	
FROM:	1: Sandra K. Nicodemus		
Name (Printed or typed)			
_	300 SE 34th Place		
FROM: Sandra K. Nicodemus Name (Printed or typed) 300 SE 34th Place Address Ocala, F1. 34471 City, State & Zip (352) 732- 2861 Daytime Telephone number			
a ~1 -	Ocala, F1. 34471		
City, State & Zip (352) 732- 2861			
11/11	(352) 732- 2861	(352) 732- 2861	
Daytime Telephone number			

ARTICLES OF INCORPORATION WILLOWBRIDGE CENTER FOR HOLISTIC SERVICES INC.

FILED 97 NOV 12 AM 9:28 SECRETARY OF STATE TALLAHASSEE, FLORISA

A NOT-FOR-PROFIT CORPORATION

- ARTICLE I: The name of this corporation shall be WILLOWBRIDGE CENTER FOR
 HOLISTIC SERVICES, INC. This corporation shall have two
 functions: 1) as a community mental health provider specializing
 in behavoral management with medications, therapy and rehabilitative employment programs and 2) as a spiritual growth
 center for individuals using alternative naturopathic treatments
 and workshops, seminars and support groups and 3) providing
 spiritual counseling and quidance.
- ARTICLE II: The principal place of business and mailing address of WILLOWBRIDGE CENTER shall be 300 SE 34th Place, Ocala Florida 34471. The current telephone number is (352) 732-2861.
- ARTICLE III: The specific purposes for which WILLOWBRIDGE CENTER FOR
 HOLISTIC SERVICES, INC. is organized are 1) to promote wellness for individuals suffering with neurobiological
 illnesses: a) through the use and management of medications;
 b)through the use of psychotherapy and counseling; c)
 through the use of psycho-rehabilitation services and d)
 through employment opportunties developed by the corporation.

 (2) to promote the use of natural holistic spiritual

healing practices by the UNIVERSAL POWER's indwelling presence through a synthesis of body, mind and spirit. (3) to promote workshops, seminars and courses on the mysteries of life and how they are an intergral part of the holistic synthesis of body, mind and spirit.

ARTICLE IV: The BOARD OF DIRECTORS will serve as the day to day
management team. The Directors shall hold their positions
until such a time as they resign, die or are incapacitated
physically or mentally which would prohibit them to function
as needed. A vacancy to the Board will be the entire Board's
responsibility to interview, recommend and vote for replacement. Duties of each Board member will be detailed in the BYLAWS..The Board of Directors will have seven (7) members.

2) An ADVISORY BOARD will assist the Board of Directors in decisions affecting the development of programs. They will be sought from the various interest groups that WILLOWBRIDGE serves. The Advisory Board will number not more than five (5) persons. The Advisory Board members will serve terms of four (4) years. Their duties and times of elections will be outlined in the BY-LAWS.

3) A FOUNDATION BOARD will be developed from members of the local communities to assist the corporation to raise monies for the special client's needs orbuilding projects. The Foundation Board members will be appointed for terms of three(3) years. Members duties will be outlined in the BY-LAWS. The Foundation Board shall will number thirteen (13).

ARTICLE V: The initial registered agent is SANDRA K. NICODEMUS 300 SE 34th Place, Ocala, FL. 34471

ARTICLE VI: The names and addresses of the Incorporators are

- 1) SANDRA K. NICODEMUS 300 SE 34th Place Ocala, Fl. 34471
- 2) JULIA K. ROTFORT 300 SE 34th Place, Ocala, Fl. 34471
- 3) DIXIE KOHLER 2721 SE 8th Ave. Ocala, Fl. 34471
- 4) DONNA STAPLETON 2300 SE 173rd Ave. Silver Springs,Fl. 34488
- 5) ELIZABETH HAMLEY 4075 S. Ivanhoe Terrace, Inverness Fl 34452

Signature/Incorporator

SANDRA K. NICODEMUS

11/10/97

Date

FILED 97 NOV 12 AM 9: 29 SECRETARY OF STATE ALLAHASSEE, FLORIDA

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 appointment as regostered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

SANDRA K. NICODEMUS

Date