N99000006739

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	9000030420 -11/12/99-01 ******	0195 020016 ******78,75
	e Coast Mult; Services, Inc. Proposed corporate name - must include suffix) Proposed Corporate name - must include suffix) Proposed Coast Mult; Services, Inc. Proposed Corporate name - must include suffix) Proposed Coast Mult; Services, Inc. Proposed Coast Mult; Se	FILED 99 NOV 12 AM 9:
	nd one (1) copy of the articles of incorporation and a check	<u>~</u>
for :	₹ \$78.75	
FROM:	Name (Printed or typed)	gg nadon
	1680 SW Bayshore Blud, Suite 107 Address	,
	Port St. Lucie FL 34984 City, State & Zip	·· · ·
•	(561) 337-0062	
e - ;	Daytime Telephone number	

F. CHESSER NOV 1 6 1959

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

499 54910

Articles Of Incorporation

Of

TREASURE COAST MULTI SERVICES, INC.

The undersigned, acting as Incorporator of a corporation pursuant to Chapter 617, Florida Statute adopts the following Article of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be Treasure Coast Multi Services, Inc.

ARTICLE II - PLACE OF BUSINESS

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

1006 North Parrott Avenue Okeechobee, Florida 34972

ARTICLE III - PURPOSE

The purpose of this corporation is to engage in the business of providing outpatient mental health services to indigent patients.

The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful business purposes which may become necessary, profitable or desirable for the furtherance of the corporate objectives expressed above.

ARTICLE IV – LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes without limitation.

ARTICLE V - INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of four members. The number may be increased or decreased from time to time by vote of the stockholders but, in no case shall the number of Directors be less than one. The names and addresses of the Directors constituting the initial Board of Directors are:

NAME	ADDRESS
Angel Rivera	3537 SW Pumpkin Street, Port St. Lucie, Florida 34953
Renato R. Alcalde, M.D.	1321 SW Cedar Cove, Port St. Lucie, Florida 34986
Maria Rivera	3537 SW Pumpkin Street, Port St. Lucie, Florida 34953
Mirasol Alcalde	1321 SW Cedar Cove Port St. Lucie, Florida 34086

ARTICLE VI - REGISTERED AGENT

The name of the initial registered agent is:

NAME

___ADDRESS

Angel Rivera

3537 SW Pumpkin Street, Port St. Lucie, Florida 34953

ARTICLE VII - INCORPORATORS

The name and street of the person signing these Articles of Incorporation is:

Angel Rivera

3537 SW Pumpkin Street, Port St. Lucie, Florida 34953

Incorporator, Angel Rivera

CERTIFICATE OF DESIGNATION REGISTERED AGENT AND OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, hereby submits the following:

The name of the corporation is: Treasure Coast Multi Services Inc.

The name and address of the registered agent and office is:

Angel Rivera 3537 SW Pumpkin Street Port St. Lucie, Florida 34953

Having been named to accept service of process for Treasure Coast Multi Services, at the place designated above and in the Articles of Incorporation, Angel Rivera agrees to act in this capacity, and agrees to comply with the provisions of all statutes relating to the proper and complete performance of duties, and is familiar with and accepts the obligations of the position of registered agent.

Signature Angel Rivera Date

99 NOV 12 AM 9: 2