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TRANSMITTAL LETTER

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

100003106751--4
-01/21/00--01089--019
*****78.75 *****78.75

SUBJECT: New Generation Treatment Program, Inc.
(Proposed corporate name - must include suffix)

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 of
Status
ADDITIONAL COPY REQUIRED

FROM: Fernando R. Crespo
Name (Printed or typed)

7331 Coral Way, #267-B
Address

Miami, Florida 33155
City, State & Zip

(805) 267-6030
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JAN 21 AM 8:55

FILED

F. CHASSIN JAN 28 1999

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

New Generation Treatment Program, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7331 Coral Way, Suite 267-B
Miami, FL 33155

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time

100 shares

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Fernando R. Crespo
7331 Coral Way, Suite 267 B

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Fernando R. Crespo
7331 Coral Way, Suite 267-B
Miami, FL 33155

Signature/Incorporator

Date

01/04/00

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date

01/04/00