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To: Division of Corporations
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EFFECTIVE DATE

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From: Account Name : EMPIRE CORPORATE KIT COMPANY
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FLORIDA PROFIT CORPORATION OR P.A.

ALCHOHAAAAL AAA&A ABUSE A 24 HOUR ABLE HELPLINE AND

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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EFFECTIVE DATE
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P.02/06

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ARTICLES OF INCORPORATION

OF

**AI.CHOHAAAAL AA&A ABUSE A 24 HOUR ABLE
HELPLINE AND TREATMENT OF FIRST STEP TO RECOVERY, INC.**

I, the undersigned incorporator of this corporation under Florida Statute 607, as amended,
do hereby associate myself to form a corporation and adopt the following Articles of Incorporation.

ARTICLE I

The name of this corporation is: AI.CHOHAAAAL AA&A ABUSE A 24 HOUR ABLE
HELPLINE AND TREATMENT OF FIRST STEP TO RECOVERY, INC.

The mailing address for the Corporation is:

150 S. Pine Island Road, Plantation, Florida 33324

ARTICLE II

PURPOSE AND NATURE OF BUSINESS

The purpose of this corporation and general nature of the business to be conducted are as
follows:

A. To engage in any business activity or endeavor which is lawful under the laws of the
State of Florida, and the United States of America.

ARTICLE III

DURATION OF CORPORATION

This corporation is to have perpetual existence commencing on the date of execution and
acknowledgment of these Articles of Incorporation.

THIS INSTRUMENT PREPARED BY:
MAYNARD J. HELLMAN, ESQUIRE
FLORIDA BAR NO. 137411
150 S. PINE ISLAND ROAD, SUITE 500
PLANTATION, FL 33324
Tel: (954) 577-9177
Fax: (954) 577-9883

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ARTICLE IV
CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of Common Stock, each share having no par value.

ARTICLE V
INITIAL CAPITAL CONTRIBUTION

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

ARTICLE VI
SUBSCRIBERS

The name and address of the subscriber of these Articles of Incorporation and the number of shares he has elected to take are as follows:

<u>SUBSCRIBER</u>	<u>ADDRESS</u>	<u>NUMBER OF SHARES</u>
David Shurgin	150 S. Pine Island Road, Suite 500 Plantation, FL 33324	1

ARTICLE VII
DIRECTORS

THIS INSTRUMENT PREPARED BY:
MAYNARD J. HELLMAN, ESQUIRE
FLORIDA BAR NO. 137411
150 S. PINE ISLAND ROAD, SUITE 500
PLANTATION, FL 33324
Tel: (954) 577-9177
Fax: (954) 577-9883

The initial number of Directors of this corporation shall be one (1). The number of Directors may either be increased or decreased from time to time by a vote of the stockholders in conformity with the By-Laws of the Corporation but shall never be less than one (1).

ARTICLE VIII

INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and the Corporation Laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until his successor is elected and qualified, is:

NAME

ADDRESS

David Shurgin

150 S. Pine Island Road, Suite 500
Plantation, Fl. 33324

ARTICLE IX

INITIAL REGISTERED OFFICE AND AGENT

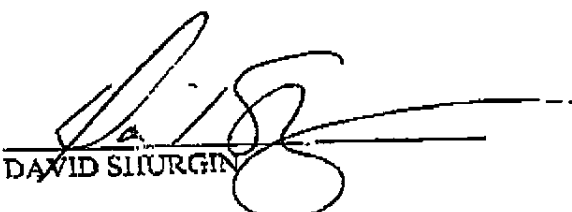
The street address of the initial registered office of this corporation is 150 S. Pine Island Road, Suite 500, Plantation, Florida 33324, and the name of the initial Registered Agent of this corporation at that address is Maynard J. Hellman, Esq..

ARTICLE X

INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

DATED this 20th day of March, 2001.


DAVID SHURGIN

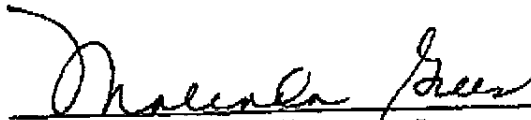
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STATE OF FLORIDA)
)SS
COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, personally appeared DAVID SHURGIN to me well known to be the person described in and who executed the foregoing Certificate of Incorporation, and who acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Broward County, Florida, this 20th day of March, 2001.



Notary Public, State of Florida at Large

My Commission Expires:



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ALCOHAAAAAL AA&A ABUSE A 24 HOUR ABLE HELPLINE
AND TREATMENT OF FIRST STEP TO RECOVERY, INC.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE PURPOSES
 OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS
 _____ MAY BE SERVED _____

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING
 IS SUBMITTED:


FIRST, THAT ALCOHAAAAAL AA&A ABUSE A 24 HOUR ABLE HELPLINE AND
 TREATMENT OF FIRST STEP TO RECOVERY, INC. IS DESIRING TO ORGANIZE OR
 QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE
 OF BUSINESS AT 150 SOUTH PINE ISLAND ROAD, SUITE 500, BROWARD COUNTY,
 STATE OF FLORIDA, HAS NAMED MAYNARD J. HELLMAN, ESQ., AS ITS AGENT TO
 ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Signature: 
 David Shurgin

Title: Subscriber

Date: March 20, 2001

Having been named to accept services of process for the above stated corporation, at the
 place designated in this certificate, I hereby agree to act in this capacity, and I further agree to
 comply with the provisions of all statutes relative to the proper and complete performance of my
 duties.

Signature: 
 Maynard J. Hellman, Esq.
 (Registered Agent)

Date: March 20, 2001

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