

PO1000033689

Sherrie K. Hendrix
1168 Donovan Street
Interlachen, Florida 32148

February 19, 2001

Secretary of State
Corporation Division
Executive Towers
Tallahassee, FL 32304

Dear Sir or Madam:

Enclosed please find the Articles of Incorporation of SKH Support Services, Inc. Please file these with the appropriate authorities. I have enclosed a check to cover the filing costs and fees.

If you have any questions or should you require any further information, please contact me at the address above.

Sincerely,

Sherrie K Hendrix

Sherrie K. Hendrix

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-03/05/01-01098-005
*****70.00 *****70.00

Also enclosed is a photocopy of the Articles. Please return this to me with the filing date stamped on it. Thank you.

2557-611
W01-5321

FILED
2001 APR -2 PM 12:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

4/3/01



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

FILED

2001 APR -2 PM 12: 56

SECRETARY OF STATE
TALLAHASSEE FLORIDA

March 8, 2001

SHERRIE K. HENDRIX
1168 DONOVAN STREET
INTERLACHEN, FL 32148

SUBJECT: SKH SUPPORT SERVICES, INC.
Ref. Number: W01000005321

We have received your document for SKH SUPPORT SERVICES, INC..
However, the document has not been filed and is being returned for the following:

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the 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) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 501A00014323

**Articles of Incorporation
of
SKH Support Services, Inc**

FILED
2001 APR -2 PM 12:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**I.
Name**

The name of the Corporation is SKH Support Services, Inc, hereinafter referred to as the "Corporation."

**II.
Purposes**

The purpose of the Corporation is to transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

**III.
Principal Office and Registered Agent**

The principal office of the Corporation is 1168 Donovan Street, Interlachen, Florida 32148. The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is Sherrie Hendrix, 1168 Donovan Street, Interlachen, Florida 32148.

**IV.
Duration**

The duration of the Corporation shall be perpetual.

**V.
Initial Business**

The initial business of the Corporation shall be:

Case management for the handicapped.

VI.
Capital Stock

The Corporation is authorized to issue only one class of shares of stock which shall be designated Common Stock. The total number of shares the Corporation shall have authority to issue is 100, each share to have a par value of \$ 1.00.

VII.
Incorporators

The names and mailing addresses of the incorporators are:

<u>Incorporator Name</u>	<u>Incorporator Address</u>
Sherrie Hendrix	1168 Donovan Street, Interlachen, FL 32148

VIII.
Directors

The number of directors constituting the initial Board of Directors of the Corporation is: one. The name(s) and address(es) of the person(s) who is/are appointed to act as the initial director(s) of the Corporation is/are:

<u>Director Name</u>	<u>Director Address</u>
Sherrie Hendrix	1168 Donovan Street, Interlachen, FL 32148

IX.
No Personal Liability

The private property of the stockholders shall not be subject to the payment of corporate debts.

X.
Operating Provisions

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

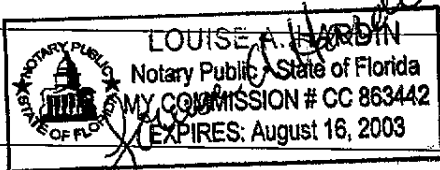
XI.
Fiscal Year

The fiscal year of the Corporation shall be from 1/1 to 12/31 of each year.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on this, the

27 day of February, 19 2001

Sherrie K. Hendrix
Sherrie K. Hendrix

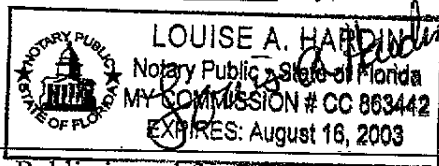


State of Florida

County of Putnam

BEFORE ME, the undersigned authority, on this day personally appeared Sherrie Kay Hendrix, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME this the 27th day of February, 19 2001



Notary Public in and for the
State of Florida

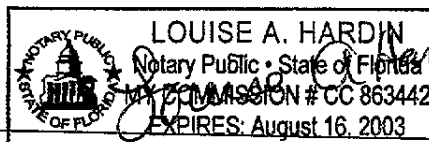
My Commission Expires:

State of Florida

County of Putnam

BEFORE ME, the undersigned authority, on this day personally appeared Sherrie Hendrix, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME this the 27th day of February, 19 2001



Notary Public in and for the
State of Florida

My Commission Expires:

FILED

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

2001 APR -2 PM 12:56

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the Corporation is:

SKH Support Services, Inc

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

Sherrie K. Hendrix
(Name)

1168 Donovan Street
(P.O. Box NOT acceptable)

Interlachen, FL 32148
(City/State/Zip)

Phone # 904-684-6274

FAX # 904-684-6270

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.

Sherrie Hendrix
Signature

3/22/01
Date