

PO10000096157

TRANSMITTAL LETTER

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

700004619337--4  
-10/02/01--01004--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Vivian Raleigh, L.C.S.W., P.A.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

700004619337--4  
-10/02/01--01004--002  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

FROM: VIVIAN RALEIGH  
Name

P.O. BOX 101552 CAPE CORAL, FLORIDA 33910-1552  
Address

(941)560-0326  
Phone

FILED  
01 OCT - 1 AM 9:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

30aw  
10/3/01

ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

01 OCT -1 AM 9: 29

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE I NAME

*The name of the corporation shall be Vivian Raleigh, L.C.S.W., P.A.*

ARTICLE II PRINCIPAL OFFICE

*The principal place of business/ mailing address is 6387 Presidential Court, Suite 102, Ft. Myers, Florida 33919*

ARTICLE III PURPOSE

*The purpose for which the corporation is organized is to provide mental health therapy (psychotherapy) services, and to transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.*

ARTICLE IV SHARES

*The aggregate number of shares which the corporation has the authority to issue is 2000, all of which shall be common shares with a par value of \$1.00.*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

*The name(s), address(es) and title(s) of the Officers/Director/Stockholder is Vivian Raleigh, President-Treasurer. The address of the President/Officer is 2701 S.W. 29th Place, Cape Coral, Florida 33914.*

ARTICLE VI REGISTERED AGENT

*Vivian Raleigh, President, operating the business from 6385 Presidential Court, Suite 102, Ft. Myers, Florida 33919 is the initial registered agent.*

ARTICLE VII INCORPORATOR

*Vivian Raleigh, President and Owner, operating the business from the principal address of 6385 Presidential Court, Suite 102, Ft. Myers, Florida 33919, is the Incorporator if this business.*

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept te appointment as registered agent and agree to act in this capacity.

*Juan Raleigh*  
Signature/Registered Agent

9/27/01  
Date

*Juan Raleigh*  
Signature/Incorporator

9/27/01  
Date

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01 OCT -1 AM 9:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA