# PO200011480 TRANSMITTAL LETTER

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

SUBJECT: <u>Behaviaro</u> (PR	1 Health	Center	of	North	Florida	Inc.
(PR	OPOSED CORPO	RATE NAME -	- MUST	INCLUDE	SUFFIX)	<del></del>

100004852491--1 -02/01/02--01023--001 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Enclosed are 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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Merlin Langley Name (Printed or typed)
Name (Printed or typed)
1223 Ronds Pointe Dr. East
Tallahassee, Fla. 32312
City, State & Zip
850-893-0669
Daytime Telephone number

2002 FEB - 1 AM 8: 59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

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FILED

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## ARTICLES OF INCORPORATION

OF

SECRETARY OF STATE TALLAHASSEE FLORIDA

# BEHAVIORAL HEALTH CENTER OF NORTH FLORIDA, INC.

#### ARTICLE I NAME

The name of the corporation shall be: BEHAVIORAL HEALTH CENTER OF NORTH FLORIDA, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1223 RONDS POINTE DR. EAST TALLAHASSEE, FLORIDA 32312

#### ARTICLE III PURPOSE

The general nature of the business to be tranacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

### ARTICLE IV SHARES

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is One Thousand (1000) shares of common stock (having a par value of \$1.00 per share).

## ARTICLE V TERM OF EXISTENCE

This Corporation shall have perpetual existence, commencing upon the filing of these articles with the office of the Secretary of State of Florida, on FEBRUARY 1, 2002.

## ARTICLE VI BOARD OF DIRECTORS

The Corporation shall have two directors initially. The number of directors may be increased or diminished from time to time by the bylaws adopted by the stockholders, but shall never be less than one.

# ARTICLE V11 INITIAL BOARD OF DIRECTORS

The names of the initial directors of this Corporation and their street addresses are:

MERLIN R. LANGLEY 1223 RONDS POINTE DRIVE EAST TALLAHASSEE, FLORIDA 32312

YVONNE NELSON-LANGLEY 1223 RONDS POINTE DRIVE EAST TALLAHASSEE, FLORIDA 32312

The persons named as initial directors shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, which ever occurs first.

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SECRETARY OF STATE TALLAHASSEE FLORIDA

## ARTICLE VIII REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is: MERLIN R. LANGLEY 1223 RONDS POINTE DRIVE EAST TALLAHASSEE, FLORIDA 32312

### ARTICLE IX INCORPORATOR

The name and address of the Incorporator is: MERLIN R. LANGLEY 1223 RONDS POINTE DRIVE EAST TALLAHASSEE, FLORIDA 32312

The undersigned incorporator has executed these Articles of Incorporation this 1st day of February 2002.

MERLIN R. LANGLEY - Incorporator

Certificate Designating Place of Business of Domicile for the Service of process within this state, naming agent upon whom process may be served.

In compliance with Section 607.0501, Florida Statues, the following is submitted:

That BEHAVIORAL HEALTH CENTER OF NORTH FLORIDA, INC., MERLIN R. LANGLEY, president, desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation at 1223 Ronds Pointe Drive East, Tallahassee, County of Leon, State of Florida, has named MERLIN R. LANGLEY, located at 1223 Ronds Pointe Drive East, Tallahassee, County of Leon, State of Florida, as its agent to accept service of process within this State.

#### ACKNOWLEDGEMENT:

Having been named to accept service of process for **BEHAVIORAL HEALTH CENTER OF NORTH FLORIDA**, **INC.**, the above stated Corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

MERLIN R. LANGLEY, REGISTERED AGEN

DATE