

Peter J Tremblay
Bookkeeping Unlimited

3100 Buccaneer Road
Lantana, FL 33462
(561)966-9288

P02000061205

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

500005666335--9
-06/03/02--01098--003
*****78.75 *****78.75

Subject: Poinciana Counseling Center, Inc.

Enclosed is an original and one (1) copy of the articles of
incorporation for Poinciana Counseling Center, Inc. along with a check
in the amount of \$ 78.75

Thanking you in advance.

Sincerely,



Peter Tremblay

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JUN -3 AM 9:05

F. CHESSEB JUN 4

4

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Poinciana Counseling Center, Inc.

ARTICLE II PRINCIPAL OFFICE

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

**513 Griswold Drive
Lake Worth, FL 33461**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JUN -3 AM 9:05

ARTICLE III SHARES

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

**100 shares of common stock,
of \$1.00 par value**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Samuel Terrazas
513 Griswold Drive
Lake Worth, FL 33461**

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Samuel Terrazas

**513 Griswold Drive
Lake Worth, FL 33461**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29th day of May, 2002

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


Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: Poinciana Counseling Center, Inc.

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

Samuel Terrazas

(NAME)

513 Griswold Drive

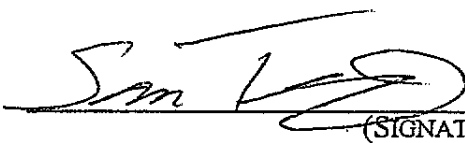
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Lake Worth, FL 33461

(CITY/STATE/ZIP)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JUN -3 AM 9:05

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)

5/29/02
(DATE)