P0200074103 NatalieGrace Pena

10039 Boynton Place Circle Boynton Beach, FL. 33437 (561) 736-5825 / Fax: (561) 731-5356

June 28, 2002

Florida Division of Corporations

P.O. Box 6327 Tallahassee, FL. 32314

To Whom It May Concern:

I am seeking to form a corporation in the name of "The Center for Healthy Psyche". I called last week and was informed there was no conflict for this name. I have enclosed the Articles of Incorporation and a check in the amount of \$78.75 payable to The Division of Corporations. I am also requesting instructions on the remaining requirements once the articles are approved and filed.

Thank You,

NatalieGrace Pena

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ARTICLES OF INCORPORATION OF THE CENTER FOR HEALTHY PSYCHE, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORE

The undersigned subscribers to these Articles of Incorporation, natural persons competent to contract, hereby form a corporation under the laws of the state of Florida.

ARTICLE I- NAME

The name of this corporation is The Center for Healthy Psyche, Inc.

ARTICLE II- DURATION

This corporation shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State.

ARTICLE III- PURPOSE

This corporation is organized for the purpose of transacting any and lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE IV-CAPITAL STOCK

This corporation is authorized to issue 500 shares of One Dollar (\$1.00) par value common stock which shall be designated as "Common Shares".

ARTICLE V-PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI- INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial principal offices of this corporation is 10039 Boynton Place Circle, Boynton Beach, Florida 33437. The name of the initial registered agent

of this corporation is Vivian M. Knapp, Esquire at 142 Kapok Crescent, Royal Palm Beach, Florida 33411. Service of Process can be effectuated at said address.

ARTICLE VII-INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) Director constituting the initial Board of Directors. the number of directors may be either increased or decreased from time to time by the bylaws; however, there shall never be less than one director nor more than five.

The names and addresses of the initial Board of Directors of the corporation are:

<u>Name</u>	Address	Shares	Consideration
	10039 Boynton Place Circle Boynton Beach, FL. 33437	500	\$500.00

ARTICLE VIII- INCORPORATORS

The names and addresses of the incorporators signing these articles are:

NatalieGrace Pena 10039 Boynton Place Circle Boynton Beach, FL. 33437

ARTICLE IX- OFFICERS

The names and addresses of the original Officers of the corporation are:

NatalieGrace Pena President
10039 Boynton Place Circle
Boynton Beach, FL. 33437

Mario A. Pena Secretary/Treasurer
10039 Boynton Place Circle
Boynton Beach, Fl.33437

ARTICLE X- INDEMNIFICATION

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

ARTICLE XI- AMENDMENT

This corporation reserves this right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, by a majority vote of the Board of Directors, and any right conferred upon shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporators have executed these Articles of Incorporation on the ______ day of July, 2002.

LETO LO EXILLE YVIII NATALIÈGRACE PENA

STATE OF FLORIDA COUNTY OF PALM BEACH

BEFORE ME, a notary public authorized to take acknowledgments in the State and County set forth above, appeared NATALIEGRACE PENA, known to be and known by me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County ove, this _____ day of July, 2002.

Notary Public

Typed, Stamped or Printed Name

My Commission Expires:

Cynthia M Lowery

My Commission CC817915

My Expires March 16, 2003

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

I HEREBY CERTIFY that I am familiar with the duties and responsibilities of a Registered Agent and hereby accept same as Registered Agent of THE CENTER FOR HEALTHY PSYCHE, INC.

Vivian M. Knapp, Esquire

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SECRETARY OF STATE