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Dr. Tonia L. Turner 350 Camino Gardens Blvd. Suite 301 Boca Raton, FL 33432

2003 JAN 21 AM 10: 04

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

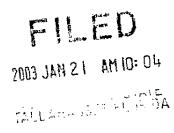
SUBJECT: South Florida Society for Trauma-Based Disorders, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation. A check for \$78.75, for filing fee and certified copy is enclosed.

FROM: Dr. Tonia L. Turner

350 Camino Gardens Blvd, Suite 301

Boca Raton, FL 33432



ARTICLES OF INCORPORATION

OF

South Florida Society for Trauma-Based Disorders, Inc.

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

ARTICLE I - NAME

The name of the corporation shall be: South Florida Society for Trauma-Based Disorders, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation shall be: c/o Dr. Tonia Turner, 350 Camino Gardens Blvd. Suite 301, Boca Raton, FL 33432

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding any one time is 100 shares.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is Dr. Tonia Turner, and the address is c/o Dr. Tonia Turner, 350 Camino Gardens Blvd. Suite 301, Boca Raton, FL 33432

ARTICLE V - OFFICERS

The Officers of the corporation are Dr. Tonia Turner, Dr. John Adams and Dr. Constance Avery-Clark.

ARTICLE VI - INCORPORATOR

The name and address of the incorporators to these Articles of Incorporation are:

Name	Address	
Dr. Tonia L. Turner	350 Camino Gardens Blvd. Suite 301 Boca Raton, FL 33432	
Dr. John Adams	1433 N.W. 92nd Way Coral Springs, FL 33071	
Dr. Constance Avery-Clark	1433 N.W. 92nd Way Coral Springs, FL 33071	

The undersigned incorporators have executed theses Articles of Incorporation this

day of Janny, 200

Dr. Jonia L. Turner

Incorporator

Dr. John Adams Incorporator

11111/11/11

Incorporator

FILED

CERTIFICATE OF DESIGNATION OF2003 JAN 21 AM 10: 04

REGISTERED AGENT/REGISTERED OFFICE



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:	South Florida Society for Trauma-Based Disorders, I	nc
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The name and address of the registered agent and office is:	-
Dr. Tonia L. Turner	
350 Camino Gardens Blvd. Suite 301	-
Boca Raton, FL 33432	

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)

(Date)