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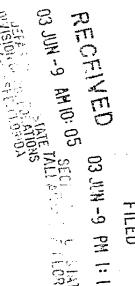
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PICK-UP WAIT MAIL				
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Special Instructions to Filing Officer:				
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Office Use Only



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EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address CORAL GABLES, FL 33134 City/State/Zip (305) 444-4994

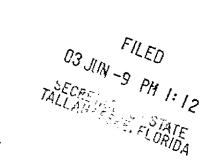
OFFICE USE ONLY

Examiner's Initials

Phone #

C	CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):						
1.	A & B PSYCHOLOGICAL ASSOCIATES, INC.						
	(Corporation Name)	(Document #)					
2.	(Corporation Name)	(Document #)					
3.	, , , , , , , , , , , , , , , , , , ,						
	(Corporation Name)	(Document #)					
4.	(Corporation Name)	(Document #)					
	☐ Walk in ☐ Pick up t	ime					
	☐ Mail out ☐ Will wait	Photocopy					
	NEW FILINGS	AMENDMENTS					
	ど Profit	Amendment					
- Transfer	NonProfit	Resignation of R.A., Officer/ Director					
Limited Liability Domestication		Change of Registered Agent Dissolution/Withdrawal					
						Other	Merger
	OTHER FILINGS	REGISTRATION/ QUALIFICATION					
	Annual Report						
	Fictitious Name	Foreign					
Name Reservation		Limited Partnership					
	<u> </u>	Reinstatement					
		Trademark					

Other



ARTICLES OF INCORPORATION OF A & B PSYCHOLOGICAL ASSOCIATES, INC.

The undersigned incorporators, for the 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:

A & B PSYCHOLOGICAL ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business of said corporation shall be at:

17878 NORTH BAY ROAD #203, SUNNY ISLES, FL 33160

with the privilege of having branch offices at other places within or without the State of Florida.

ARTICLE III CAPITAL STOCK

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

Five Hundred Shares

Articles of Incorporation

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Alfonso Valcarcel 17878 North Bay Road # 203 Sunny Isles, Fl 33160

ARTICLE V INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation are:

NAME	ADDRESS
Alfonso Valcarcel, President,	17878 N. Bay Rd. #203 Sunny Isles, Fl 33160
Barbara Iglesias, Treasurer & Secretary	17878 N. Bay Rd. # 203 Sunny Isles, Fl 33160

Articles of Incorporation

IN WITNESS WHEREOF, WE, the undersigned, being each of the original subscribers to the capital stock hereinabove named, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file these Articles, hereby declaring and certifying that the facts herein stated are true, and do respectfully agree to take the number of shares hereinabove set forth, and hereunto set our hands and seals, this the 4th day of June, 2003.

WITNESSES		
		Show la leaved
		Alfonso Varcarcel President
		Maria
		Barbara Iglesias-Treasurer &
		Secretary
STATE OF FLORIDA)		
)	SS:	
COUNTY OF DADE)		

BEFORE ME, the undersigned authority, personally appeared Alfonso Varcarcel and Barbara Iglesias, who are known to me to be the persons described in and who executed the foregoing Articles of Incorporation and who, after being by me first duly sworn, on oath, depose and say and do acknowledge before me, that the said Articles to be the act and deed of the signers respectively and the facts and matters therein set forth are true and correct.

Juan Taboada
MY COMMISSION * DD029185 EXPIRES
September 29, 2005
BONDED THULL TROY FAIN INSURANCE, INC.

CERTIFICATE DESIGNATING RESIDENT AGENT

CERTIFICATE DESIGNATING RESIDENT AGENT

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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:

A & B PSYCHOLOGICAL ASSOCIATES, INC.

2. The name and address of the registered agent and office is: Alfonso Valcarcel, 17878 N. Bay Road #203, Sunny Işles, FI 33160

Corp. Officer: Barbara Iglesias

Date: June 4, 2003

Having been named to accept service of process for the above stated corporation at 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.

STATE OF FLORIDA)

Alfonso Valcarcel

) SS:

COUNTY OF DADE

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County above named to take acknowledgements personally appeared Alfonso Valcarcel to me known to be the person described as the Resident Agent, and who executed the foregoing Certificate and acknowledged before me that he executed the foregoing Certificate Designating Resident Agent. IN WITNESS WHEREOF, I set my hand and official seal in the County and State named above, this day the 4th day of June, 2003

Dean Taboada

MY COMMISSION # DD029185 EXPIRES

September 29, 2005

BONDED THRU TROY FAIN INSURANCE, INC.