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CLERK OF STATE
TALLAHASSEE FLORIDA

15f 10/3/03

TRANSMITTAL LETTER

September 26, 2003

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

SUBJECT: Florida Bilingual Counseling and Behavioral Services, Inc.

Enclosed are original and one (2) copy of the articles of incorporation and check for: \$87.50 for Filing Fee, Certified Copy and Certificate of Status.

From: Sonia Leon
200 Afton Square, Suite 100
Altamonte Springs, Florida 32714
407-461-8328

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TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation will be:

Florida Bilingual Counseling and Behavioral Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principle place of business will be:

**200 Afton Square, Suite 200¹⁰¹ ©
Altamont Springs, Florida 32714**

ARTICLE III PURPOSE

The purpose for which the corporation will be organized is;

This corporation will be organize to provide Mental Health and Behavioral Services to patients in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock will be: **One**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Initial Officers and Director:

President/CEO
Sonia Leon
200 Afton Square, Suite 200¹⁰¹ ©
Altamonte Springs, Florida 32714

ARTICLE VI REGISTERED AGENT

The name of the Registered Agent in Florida will be.

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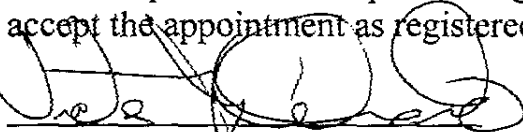
Victor M. Alvarado
419 Hornbill Place
Winter Springs, Florida 32708

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Sonia Leon
200 Afton Square, Suite 200¹⁰¹@
Altamonte Springs, Florida 32714

Having been named as register agent to accept service of process for 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



Signature/Register Agent
Victor M. Alvarado

9/26/2003

Date



Signature/Incorporator
Sonia Leon

9-26-03

Date

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