

P03000144378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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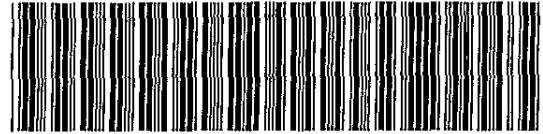
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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

SUBJECT: LABELLE COUNSELING CENTER P.A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>			

FROM: JANET M. FENNER  
Name (Printed or typed)

700 KIRBY THOMPSON ROAD  
Address

ALVA, FLORIDA 33920  
City, State & Zip

(863) 612-1067  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

LABELLE COUNSELING CENTER P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

94 HALL STREET, P.O. BOX 1525, LABELLE, FLORIDA 33975

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PSYCHOTHERAPY

**ARTICLE IV SHARES**

The number of shares of stock is:

3000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

JANET M. FENNER, PRESIDENT

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

JANET M. FENNER  
700 KIRBY THOMPSON ROAD  
ALVA, FLORIDA 33920

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JANET M FENNER  
700 KIRBY THOMPSON ROAD  
ALVA, FLORIDA 33920

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Having been named as registered 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

Janet M Fenner  
Signature/Registered Agent

11/21/03  
Date

Janet M Fenner  
Signature/Incorporator

11/21/03  
Date