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TRANSMITTAL LETTER

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

SUBJECT:	PROPOSED COMPORA	pt Services	S. JUC UDE SUFFIX)	
Enclosed is an origina	d and one(1) copy of the article			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Diane Straughter Name (Printed or typed) 19143 NW 34 th Court			
	Address Miami, Florida 33056			
	City, State & Zip			
	786-413-8339			
	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:

DS Support Services, Inc.

F11 FD 203 MAR 21 P 2:37

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

19143 NW 34th Court Miami, Florida 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide services to persons with developmental and other disabilities.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Diane Straughter, President/CEO 19143 NW 34th Court Miami, Florida 33056

ARTICLE VI REGISTERED AGENT

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

Diane Straughter, President/CEO 19143 NW 34th Court Miami, Florida 33056

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Diane Straughter, President/CEO 19143 NW 34th Court Miami, Florida 33056

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this artificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent/

ignature/Incorporator

Date

3/19/05 Date