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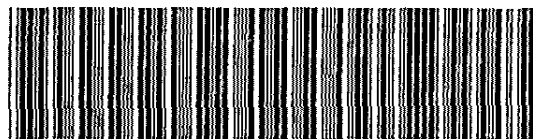
(Business Entity Name)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 APR 14 PM 3:28

D. Brown APR 20 2005

TRANSMITTAL LETTER

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

SUBJECT: THE HAILE PSYCHIATRY AND PSYCHOTHERAPY GROUP, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: MICHAEL J. MARCHESE, M.D.
Name (Printed or typed)

5300 SW 91st TERRACE, SUITE A
Address

GAINESVILLE, FLORIDA 32608
City, State & Zip

352 377 8770
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)

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SECRETARY OF STATE
DIVISION OF CORPORATION

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ARTICLE I NAME

The name of the corporation shall be:

THE HAILE PSYCHIATRY AND PSYCHOTHERAPY GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5300 SW 91st TERRACE, SUITE A
GAINESVILLE, FL. 32608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE PSYCHIATRIC AND PSYCHOLOGICAL SERVICES IN A PRIVATE PRACTICE SETTING

ARTICLE IV SHARES

The number of shares of stock is:

50 (FIFTY)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL J. MARCHESE, MD, DIRECTOR
9303 SW 53 LANE
GAINESVILLE, FL. 32608

ELIZABETH J. BUCKLEY, PH.D., DIRECTOR
6823 SW 83 TERRACE
GAINESVILLE, FL. 32608

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

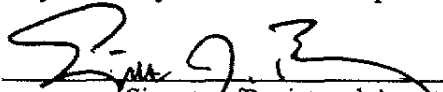
ELIZABETH J. BUCKLEY, PH.D.
6823 SW 83 TERRACE
GAINESVILLE, FL. 32608

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL J. MARCHESE, M.D.
9303 SW 53 LANE
GAINESVILLE, FL. 32608

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



Signature/Registered Agent

4/12/2005

Date



Signature/Incorporator

4/12/05

Date