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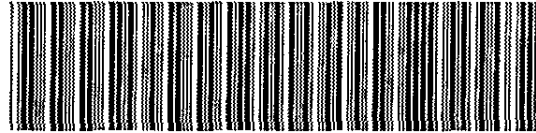
(Business Entity Name)

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TALLAHASSEE, FLORIDA

70

## COVER LETTER

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

SUBJECT: M. ZENILDE A. M. DE LIMA, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: M. ZENILDE A. M. DE LIMA  
Name (Printed or typed)

12641 WORLD PLAZA LANE, SUITE 56  
Address

FORT MYERS, FL 33907  
City, State & Zip

(239) 298-1032  
Daytime Telephone number

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

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# 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:

M. ZENILDE A. M. DE LIMA, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12641 WORLD PLAZA LANE, SUITE 56  
FORT MYERS, FL 33907

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE PSYCHIATRIC CARE FOR PATIENTS IN A  
DOCTOR'S OFFICE (PERSONAL SERVICE CORPORATION)

## ARTICLE IV SHARES

The number of shares of stock is:

1,500 SHARES WITH A PAR VALUE OF \$1.00 ON ALL SHARES

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

M. ZENILDE A. M. DE LIMA - 12790 ALLENDALE CIRCLE - FORT MYERS  
FL 33912 - CHIEF EXECUTIVE OFFICER

A. FABIO M. M. DE LIMA - 12790 ALLENDALE CIRCLE - FORT MYERS  
FL 33912 - OPERATIONS OFFICER

## ARTICLE VI REGISTERED AGENT

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

M. ZENILDE A. M. DE LIMA  
12641 WORLD PLAZA LANE, SUITE 56  
FORT MYERS FL 33907

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

M. ZENILDE A. M. DE LIMA  
12790 ALLENDALE CIRCLE  
FORT MYERS FL 33912

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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

M. Zenilde A. M. de Lima  
Signature/Registered Agent M. ZENILDE A. M. DE LIMA

6/29/2007  
Date

M. Zenilde A. M. de Lima  
Signature/Incorporator M. ZENILDE A. M. DE LIMA

6/29/2007  
Date