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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(business citity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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FILED

2010 MAR 17 PN 4: 42

SHOW LARY OF STATE
LANT MARSEE FI ORIDA

T. Burch MAR 1.8.2010

COVER LETTER

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

SUBJECT: _	Domestication
Enclosed is an o	original and one (1) copy of the Certificate of Domestication and a check for:
FEES:	
Articles	te of Domestication \$ 50.00 of Incorporation and Certified Copy \$ 78.75 domesticate and file \$128.75
OPTIONAL:	
Certifica	te of Status \$ 8.75 DIFWE MANDELP
	Name (printed or typed) 700 Villege Way Address
	P.U. Florida 34683 City, State & Zip
	Daytime Telephone Number
	Fam COUNSE ANI. Can.



March 9, 2010

DIANE MANDELL 700 VILLAGE WAY PALM HARBOR, FL 34683

SUBJECT: FAMILY CONSELING CENTER, INC.

Ref. Number: W10000011854

We have received your document for FAMILY CONSELING CENTER, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Letter Number: 510A00005815

Tim Burch Regulatory Specialist II New Filing Section

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Division of Comparations D.O. DOV 6207 Tallahagas Florida 20214

CERTIFICATE OF DOMESTICATION

Th	e undersigned, DANE MAN DELL, PRESIDENT JOUNTER (Name) (Title)
of in	F. A. C. A. C. C. L.
1.	The date on which corporation was first formed was 4 26, 1994
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was
3.	
	was Family Counseling Center Inc.
4.	The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to
	s. 607.0202 and 607.0401 with this certificate is
5.	The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Formedy which New Florida.
	Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.
I aı	m DIANE MANDELL FAMILY Consoling Center Inc. 5
and	d am authorized to sign this Certificate of Domestication on behalf of the corporation and have done this the 3 day of
	(Authorized Signature)
	Filing Fee

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy <u>\$ 78.75</u> Total to domesticate and file \$128.75

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME THE NAME OF THE CORPORATION SHALL BE: Palm Har but Family Co	3un S
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: 700 Villege WAY PAIM HArbor, Flundo 34683	Tn
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: Conseling Practice	SEONETARY OF A
THE NUMBER OF SHARES OF STOCK IS:	PN 4: 42 OF STATE
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: DIANE MANGELL President, UNITED	
DIANE MANDELL President, owner 100 Village Way PAIM HArbor 1=100 34683 ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS	
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS DIANE MANDELL 700 VIII = ye WAY PAIN WARDON FIA 34683	î :
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
DIMME MANDELL 700 VIIIAGE WAY P.U., FIA 34683 HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE A	
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. Signature/Registered Agent Date	<i>AND</i>
Signature/Incorporator Dice Maulf Date	_