

**Electronic Articles of Incorporation
For**

P13000069666
FILED
August 21, 2013
Sec. Of State
adunlap

REFLECTIONS OF RECOVERY, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

REFLECTIONS OF RECOVERY, INC.

Article II

The principal place of business address:

4400 STATE RD. 19A
6
MT. DORA, FL. 32757

The mailing address of the corporation is:

4400 STATE RD. 19A
6
MT. DORA, FL. 32757

Article III

The purpose for which this corporation is organized is:

LICENSED CLINICAL SOCIAL WORK, CERTIFIED ADDICTION
PROFESSIONAL.WE PROVIDE SUBSTANCE
ABUSE AND MENTAL HEALTH COUNSELING AND CASE
MANAGEMENT SERVICES

Article IV

The number of shares the corporation is authorized to issue is:

1

Article V

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

PAMELA A HAND
4400 STATE RD. 19A
STE. 6
MT. DORA, FL. 32757

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: PAMELA HAND

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Article VI

The name and address of the incorporator is:

PAMELA HAND
4400 STATE RD 19A
STE. 6
MT. DORA, FL. 32757

Electronic Signature of Incorporator: PAMELA HAND

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: CEO
PAMELA A HAND
4400 STATE RD. 19A
MT. DORA, FL. 32757

Article VIII

The effective date for this corporation shall be:

08/21/2013