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OBAPA - 6 PH 64 TO

STORETARY OF STATE

OBARANCE FOR A CORPA

D partment of State Dision of Corporations P. O. Box 6327 Tollahassee, FL 32314

SUBJECT:AL	TERNATIVE ASSO	CIATES INC.	<u>ተቀዋ</u> ተ	4 (6. fa -)
	(Proposed corporate	name - must include s	uffix)	
Enclosed is an orig	inal and one (1) co	opy of the articles o	of incorporation an	d a check
\$70.00 Filing Fee	x \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Cerdfied Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
FROM		D. WILLIX Jr.	***	
	5285-67 MO	NTEREY CIR. Address		
	DELRAY BEA	CH, FLORIDA. 3	3484	

APR 1 0 1995 BS#

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

City, State & Zip

Daytime Telephone number

(407) 362-0724

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ALTERNATIVE ASSOCIATES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1600 SOUTH DIXIE HIGHWAY SUITE 5AB BOCA RATON, FLORIDA.33432

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND (1000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dr. ROBERT D.WILLIX Jr. 5285-67 MONTEREY CIR. DELRAY BEACH, FLORIDA. 33484

ARTICLE V INCORPORATOR(A)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(ere):

1.) Dr.ROBERT D. WILLIX, (Pros)

5285-67 MONTEREY CIR.DELRAY BEACH, FL. 33484

2.) GERALD HOLLAND (MA)

4860 NE 12th AVENUE, FT. LAUDERDALE, FL. 33334

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF APR +6 PH 40 10 REGISTERED AGENT/REGISTERED OFFICE (1997)

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 & 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is: ALTERNATIVE ASSOCIATES INC.	
The name and address of the registered agent and office is:	
Dr. ROBERT D. WILLIX Jr.	
Dr. ROBERT D. WILLIX Jr. (Name)	
(Name)	
(Name) 1600 SOUTH DIXIE HIGHWAY.SUITE 5AB	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

MARCH 30, 1995

(Date)