

P96000002175

TRANSMITTAL LETTER

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

FILED
25 JAN -2 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: BISCAYNE BEHAVIORAL HEALTHCARE CENTER, INC.
(Proposed corporate name- must include suffix)

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

(x) \$70.00 () \$78.75 () \$122.50 () \$131.25

FROM: MAYTEL D. GONZALEZ
Name (printed or typed)
15621 S.W. 100 LANE
Address
MIAMI, FL 33196
City, State & Zip
(305) 267-1358
Daytime Telephone Number

500001676645
-01/03/96--01054--003
*****70.00 *****70.00

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

BEC 1/8

ARTICLES OF INCORPORATION

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:

BISCAYNE BEHAVIORAL HEALTHCARE CENTER, INC.

ARTICLE II PRINCIPLE OFFICE

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

152 N.W. 29th STREET, MIAMI, FL 33127

ARTICLE III SHARES

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

10,000 SHARES IRC SECT. 1244 SMALL BUSINESS STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MAYTEL D. GONZALEZ
15621 S.W. 100 LANE
MIAMI, FL 33196**

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ARTICLE V INCORPORATOR(S)

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

MAYTEL D. GONZALEZ
15621 S.W. 100 LANE
MIAMI, FL 33196

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
TWENTY SEVEN DECEMBER
_____ day of _____, 1995.

* Maytel Gonzalez
Signature

-----o0o-----

Signature

-----o0o-----

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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PURSUANT TO THE PROVISIONS OF SECTION 607.05/ or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, 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.

1. The name of the corporation is: BISCAYNE BEHAVIORAL HEALTHCARE CENTER, INC.

2. The name and address of the registered agent and office is:
MAYTEL D. GONZALEZ

(Name)

15621 S.W. 100 LANE

(P.O. Box not acceptable)

MIAMI, FL 33196

(City/ State/ Zip)

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.

Maytel Gonzalez
(Signature)