# P960000003629

与自用的原则后的复数分类

Examiner's Initials

1/11/96

LAZARUS CORPORATE INDUSTRIES.

(Requestor's Na 890 S.W. 87 AVEN (Address)	•	17/17/ ****	11796-2010722-010 1122.50 ****122.
MIAMI, FLORIDA (City, State, Zij		OFFICE USE ONLY	
(904)385-6715			
CORPORATION NAM	ME(S) & DOCUMENT NUM	BER(S) (!fknown):	
1. ASSERT	IVE COMMUN		rent; inc
2. (Corporal	Ion Name)	(Document #)	
3.	·	(= commercially	
(Corporat	ion Namo)	(Dodument #)	
	Jon Name)	(Document #)	
Walk in P	ick up time	Certified Copy	RECEIVED 96 JAN 11 AM 10: 57 IVISIOH OF CORPORATION
Mail out	Will wait Photocopy	Certificate of Status	CEIVED 111 AM 10: 57 9F CORPORATIO
NEW FILINGS	AMENDMENTS		
Profit	Amendment		) 57 ATIO
NonProfit	Resignation of R.A., Officer	/Director	<b>3</b> 1
Limited Liability	Change of Registered Agen	1	
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILINGS	REGISTRATION/ QUALIFICATION		
Annual Report	Foreign		
Fictitious Name	Limited Partnership	,	
Name Reservation	Reinstatement		
I	Trademark		

Other

CR2E031(10/92)

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#### ARTICLES OF INCORPORATION

OF

ASSERTIVE COMMUNITY TREATMENT, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

### ARTICLE I

The name of this corporation shall be:

ASSERTIVE COMMUNITY TREATMENT, INC.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate name;

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 500 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Gamaliel Rivera

1172 N.W. 133 Ct.

Miami, F1 33182

The Principal office shall be:

1172 N.W. 133 Ct.

Miami, F1 33182

#### ARTICLE VI

The initial Board of Directors shall consist of a total of three(3) person, and the name and address of the person who is to serve as an initial director is:

Joseph A. Lupu	Jose Cabrera	Gamaliel Rivera
7783 Cedar Aurst Ct.	15366 S.W. 42 Lane	1172 N.W. 133 Ct.
Lake Worth, Fl 33467	Miami, F1 33185	Miami, F1 33182
President 100%	Vice-President 100%	Secretary 100% Treasurer

The name and address of the incorporator executing these Articles of Incorporation is:

Joseph A. Lupu Jose Cabrera Camaliel Rivera
7783 Codar Aurst Ct. 15366 S.W. 42 Lane 1172 N.W. 133 Ct.
Lake Worth, F1 33467 Miami, F1 33185 Miami, F1 33182

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 10th day of \_\_\_\_\_\_\_\_, 19 96.

STATE OF FLORIDA ) SS.

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally
appeared known to me and
known by me to be the person(s) who executed the foregoing
Articles of Incorporation, and he (they) acknowledge before
me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_, 19\_\_\_\_.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

My Commission Expires:

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 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: ASSERTIVE COMMUNITY TREATMENT, INC.
2.	The name and address of the registered agent and office is:
	Gamaliel Rivera S- 200
	(NAME)
	1172 N.W. 133 Ct.
	(P.O. BOX <u>NOT ACCEPTABLE</u> )
	Miami, F1 33182
	(CITY/STATE/ZIP)
TH AN PRO	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF OCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN IS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT D AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE OVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE amount l'une.
	DATE 1 10 06