DIVIGION OF CORPORAT PUBLIC ACCEBB BYSTEM 196000001207))) ELECTRONIC FILING COVER PHEET DIVISION OF CORPORATIONS FROM: FAG-T CORP. AGENTS. INC. DEPARTMENT OF STATE 8405 NW 53RD ST STATE OF FLORIDA BUITE C-100 409 EAST GAINES STREET MIAMI FL 33166-TALLAHABBEE, FL 32399 CONTACT: LIDIA **FERNANDEZ** FAX: (904) 922-4000 PHONE : (305) 599-0839 FAX: (305) 592-9591 (((H96000001207))) DOCUMENT TYPE FLORIDA PROFIT CORPORATION OR P.A. NAME: BEHAVIORAL INSTITUTE OF CORAL GABLES, INC. FAX AUDIT NUMBER: H96000001207 CURRENT STATUS: REQUESTED DATE REQUESTED: 01/25/1996 TIME REQUESTED: 10:34:50 CERTIFICATE OF STATUS: 0 CERTIFIED COPIES: 1 NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 071001002335 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed

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ARTICLES OF INCORPORATION

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TALLERS SECRETARISE

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

ARTICLE! NAME

The name of the corporation shall be: BEHAVIURAL INSTITUTE OF CORLA GABLES, INC.

The principal place of business of this corporation shall be: 814 Ponce De Leon Ste. #419 Corel Gables, F1 33134

ARTICLE IL NATURE OF BUSINESS

This corporation may engage in or transact any-or all-lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares at \$1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

V/President: Alexis Calzadilla 13712 SW 149 Cir Lane Miami, Fl 33186

President: Catalina Rugana 10300 SW 16st Miami, Fl 33165

Prepared by: Catalina Rugana 10300 SW 16st

Miami, Fl 33165 (305) 229-02205

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ARTICLE VI INCORPORATOR(E)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

President: Catalina Rugana 10300 SW 16st Mlami, F1 33165

V/President: Alexis Calzadilla 13712 SW 149 Circ Lano Miomi, Fl 33186

Signature(s) of incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607,325, Fiorida Statutos, the undersigned corporation, organized under the laws of the State of Fiorida, submits the following statement in designating the registered office/registered agent, in the State of Fiorida.

1. The name of the corporation is: BEHAVIORAL INSTITUTE OF CORAL GABLES, INC.
2. The name and address of the registered agent and office is:
Catalina Rugana 10300 SW 16st (P.O. BOX NOT ACCEPTABLE)
Miami, Fl 33165
(CITY/STATE/ZIP)
SIGNATURE (CO) POTER OTHICS!) TITLE
DATE 1/25/96
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE-PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.
SIGNATURE.
DATE 1/25/96 ST
ED PH 4: 29 OF STATE E, FLORIDA
REGISTERED AGENT FILING FEE: