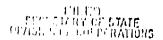
PALOCO 1373 LAZARUS CORPORATE INDUSTRIES, INC. Reduestor's Name

	Re	questor	's Name	
	090 S.W. 87		E SUITE: 16 dress	
	City/State	Zip	174 (305)552-5973 Phone #	Office Use Only
			E(S) & DOCUMENT NUM	NER(S), (if known):
				PY AND MENTAL 14E-19-LTH
	1	oration		ounent #)
	4(Cor	oration	Name) (Do	cument #)
	· .	Pic Will	wait Photocopy	Certified Copy Certificate of Status
	NEW FILINGS #	N (2)	AMENDMENTS	1 00001 70791 1 -02/06/9601090008 ****122.50 ****122.50
X	Profit	<u>L</u>	Amendment	*****122.30
	NonProfit		Resignation of R.A., Officer/ Direc	tor
	Limited Liability		Change of Registered Agent	
	Domestication		Dissolution/Withdrawal	
	Other		Merger	
	OTHER FILINGS		TEGISTRATION/S OUNDINGATION	PRESERVE OF BUSING OF SEASONS OF
 	Fictitious Name		Foreign	100 SO 60
 	Name Reservation		Limited Partnership	
		<u> </u>	Reinstatement	
			Trademark	
			Other	



ARTICLES OF INCORPORATION 96 FEB + 6 PH 12: 53

GENESIS PSYCHOTHERAPY AND MENTAL HEALTH INSTITUTE, INC.

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:

GENESIS PSYCHOTHERAPY AND MENTAL HEALTH INSTITUTE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailled address of this corporation shall be: 5558-A S.W. 8th STREET, MIAMI, FL. 33134

ARTICLE III SHARES

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

ONE HUNDRED (100) shares, having an individual par value of \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jose R. Leon, 5558-A S.W. 8th. Street, Miami, Fl. 33134

ARTICLE Y INCORPORATORISI

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

(P) JOSE R. LEON, 5558-A S.W. 8th. Street, Miami, F1. 33134

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Jose R. Leon, FI. Driving Lic. L500-436-47-046-0

Signature

Signatura

Articles of Incorporation Filing Fee - \$35

FILESO SECSTARY OF STATE DIVISION OF PURATIONS

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

96 FUD - 6 PHI2: 53

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 a jont, in the State of Florida.

۱.	The name of the corporation is:
	GENESIS PSYCHOTHERAPY AND MENTAL HEALTH INSTITUTE, INC.
2,	The name and address of the registered agent and office is:
	JOSE R. LEON
	(NAME)
	5558-A S.W. 8th Street, Miami, F1. 3:134
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	MIAMI, FLORIDA 33134
	(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO / CCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE P. ACE 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

DATE February 5 h 1996