

P960000 33179

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6127
Tallahassee, FL 32314

FILED
95 APR 12 AM 9:05
TALLAHASSEE, FL 32314

SUBJECT: Saint Michel Behavioral Health Care Center, Inc.

(Proposed corporate name- must include suffix)

900001765453
-04/02/96--01003--022
*****70.00 *****70.00

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: Reinaldo Cruz-Peraza
Name (printed or typed)
10958 S.W. 72nd Terrace
Address
MIAMI, FL 33127
City, State & Zip
(305) 598-7344
Daytime Telephone Number

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

~~796 746~~
2 RA address
796 15850

TRANSMITTAL LETTER

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

TALLAHASSEE, FLORIDA

96 APR 12 AM 9:05

FILED

SUBJECT: SAINT MICHEL BEHAVIORAL HEALTH CARE 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: REINALDO CRUZ-PERAZA

Name (printed or typed)

10958 SW 72ND TERRACE

Address

MIAMI, FL 33127

City, State & Zip

(305) 598-7344

Daytime Telephone Number

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

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:

SAINT MICHEL BEHAVIORAL HEALTH CARE CENTER, INC.

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ARTICLE II PRINCIPLE OFFICE

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

150 NW 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:


REINALDO CRUZ-PERAZA
10958 SW 72ND TERRACE
MIAMI, FL 33127

ARTICLE V INCORPORATOR(S)

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

REINALDO CRUZ-PERAZA
10958 SW 72ND TERRACE
MIAMI, FL 33127

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
TWENTY-SIXTH MARCH
_____ day of _____, 1996.



Signature
-----oOo-----

Signature

-----oOo-----

Signature

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: SAINT MICHEL BEHAVIORAL HEALTH CARE CENTER, INC.

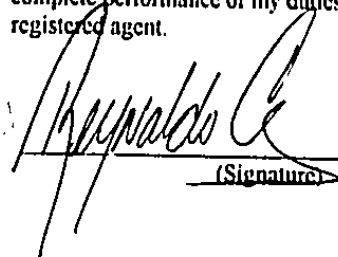
2. The name and address of the registered agent and office is:
REINALDO CRUZ-PERAZA

10958 SW 72ND TERRACE

(P.O. Box not acceptable)
MIAMI, FL 33127

(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.


(Signature)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

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