

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Mail No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

REQUEST TAKEN CONFIRMED APPROVED
 DATE 5/15/96
 TIME 10:00
 BY CD CK No. _____

WALK-IN
 Will Pick Up _____

No 52602

RE: Adults 4-Children
 Therapy Center, 5 Tring

	C.C. FEE.	DISBURSED
Capital Express™	TALLAHASSEE, FLORIDA	
☒ Art. of Inc. File		
☐ Corp. Record Search		
☐ Ltd. Partnership File		
☐ Foreign Corp. File		
☒ () Cert. Copy(s)		
☐ Art. of Amend. File		
☐ Dissolution/Withdrawal		
☐ C U B-		
☐ Fictitious Name File		
☐ Name Reservation		
☐ Annual Report/Reinstatement		
☐ Reg. Agent Service		
☐ Document Filing		
☐ Corporate Kit		
☐ Vehicle Search		
☐ Driving Record		
☐ Document Retrieval		
☐ UCC 1 or 3 File		
☐ UCC 11 Search		
☐ UCC 11 Retrieval		
☐ File No.'s, _____ Copies		
☐ Courier Service		
☐ Shipping/Handling		
☐ Phone ()		
☐ Top Priority		
☐ Express Mail Prop.		
☐ FAX () pgs.		

SUBTOTALS

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

FILED
MAY 15 1953
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
ADULTS & CHILDREN THERAPY CENTERS, 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:

Adults & Children Therapy Centers, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Adults & Children Therapy Centers, Inc.
P.O. Box 492226
Ft. Lauderdale, FL 33349-2226

ARTICLE III CAPITAL STOCK

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

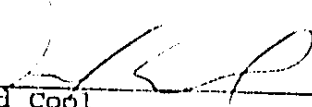
David Cool
3089 N. Oakland Forest Drive, No. 202
Oakland Park, FL 33309

ARTICLE V INCORPORATOR(S)

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

David Cool
3089 N. Oakland Forest Drive, No. 202
Oakland Park, FL 33309

The undersigned has(have) executed these Articles of
Incorporation this 12 day of May, 1996.



David Cool

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

FILED

96 MAY 16 AM 11:59

Pursuant to the provisions of section 607.0501, 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:
Adults & Children Therapy Centers, Inc.
2. The name and address of the registered agent and office is:
David Cool
3089 N. Oakland Forest Drive, No. 202
Oakland Park, FL 33309

SIGNATURE

David Cool
President

DATE: May 13, 1996

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

DATE

5/13/96