P76000046745 TRANSMITTAL LETTER

May 7, 1996

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

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Subject:

Solutions for Familles, Inc.

Enclosed is an original and one (1) copy of the amended articles of incorporation, and a check for \$ 35.00.

Please send acknowledgment of your receipt and recordation.

Thank you.

FROM: Cathy L. Lucrezi, Attorney at Law

Attorney for Solutions for Families, Inc.

2256 Heltman Street Fort Myers, FL 33901 941/334-7878 FAX 941/334-2531 FILED
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SECRETARY OF STATE
TALLAHASSEE, FLCROA

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AFFIDAVIT REGARDING RELEASE OF CORPORATE NAME

I, Susan Duda, am the Treasurer and Director of, and an original Incorporator of, Solutions for Families, Inc. On May 19, 1996, on motion duly made, seconded and unanimously carried, the Board of Directors of Solutions for Families, Inc., released the name "Solutions for Families, Inc." for immediate assumption by Solutions for Families, Inc., which is organized as a for-profit corporation, pursuant to Section 607.0302, Florida Statutes. This affidavit is made pursuant to Section 607.1405(4), Florida Statutes.

Susan Duda

Treasurer/Director, Solutions for Families, Inc.

STATE OF FLORIDA / COUNTY OF LEE /

The foregoing instrument was acknowledged before me this 19#day of May, 1996, by Susan Dude, Treasurer/Director of Solutions for Families, Inc., a Florida corporation, on behalf of the corporation. She is (1) personally known to me or (1) produced

as identification and did/did not take an oath.

Cathy L. Luciezi, Notary Public

My Co WW 155 10 11 EX DITES

Cathy L. Lucrezi

Notary Public, State of Florida

Commission No. CC 536134

My Commission Expires 05/17/00

1-403-NOTARY - Tia Notary Service & Bonding Co.

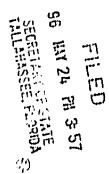
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SECRETARY OF STATE

ARTICLES OF INCORPORATION OF SOLUTIONS FOR FAMILIES, INC., A FLORIDA CORPORATION FOR PROFIT,



ARTICLE I

Name

The name of the corporation shall be Solutions for Families, Inc.

ARTICLE II

Principal Place of Business and Mailing Address

The principal place of business and the mailing address of this corporation shall be: 1106 SE 41st Street, Cape Coral, Lee County, Florida, 33905, or as otherwise indicated in the minutes of the Corporation.

ARTICLE III

Purpose

The purpose of the Corporation is to do all acts necessary and proper to conduct a business in the State of Florida to provide professional, ethical, and affordable mental health treatment services to the public; and to own and operate the associated facilities, equipment and real estate to render such services.

ARTICLE IV

Duration

The duration of this corporation is perpetual unless dissolved according to law.

ARTICLE V

Manner of Election of Directors

The manner in which the directors are elected or appointed is as described in the Bylaws of the organization.

ARTICLE VI

Corporate Powers

The corporate powers of this corporation are as provided in Section 607.0302, Florida Statutes. In addition, the Corporation is empowered to engage in any and all conduct that advances and is consistent with its purposes.

ARTICLE VII

Authorization to Issue Shares

The corporation is authorized to issue 100 shares, each share representing an equal portion of the proprietary interests of the corporation, and entitling the holder thereof to voting rights and such other entitlements as may be provided by the Bylaws of the corporation.

ARTICLE VIII

Initial Registered Agent and Street Address

The name and the street address of the initial registered agent is: Susan Duda, 1106 SE 41st St., Cape Coral, Lee County, Florida, 33904.

ARTICLE IX Incorporators

The name and address of each incorporator are: Susan Duda, 1106 SE 41st Street, Cape

Coral, FL 33904; Linda Tremont, 1799 M Stetson Street, Lehigh Acres, FL 33936.	arlyn Road, Fort Myers, FL 33901; and	Donna Fagan, 123
The undersigned incorporators executed May, 1996.	I these Articles of Incorporation on the	is <u>7 + 1</u> day of
Donna Augan Donna Fagan	Susan Duda	ida
Linda Tremont STATE OF FLORIDA / COUNTY OF LEE	Christine Holmes	olnes_
The foregoing instrument was acknowledged before Linda Tremont, and Christine Holmes who are () valid Fla. Drivers License (Holmes) as identified acknowledged to me that they executed said instrument	personally known to me (Fagan, Duda, Tremont ation, and who executed the foregoing Asticles) or who (9 produced
My Commission Lighterannanananananan	Cathy L. Lucrezi Notary Public	\sim
Cathy L. Lucrezi Notary Public, State of Florida Commission No. CC 536734 My Commission Expires 05/17/00	Cathy L. Locrezi Notary Public, State of Florida Commission No. CC 536734 Op. of My Commission Expires 05/17/00	SECH TALL/
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