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TRANSMITTAL LETTER

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

SUBJECT: Mollywood Community Mental Mealth, INC.

1 (0000000 3 534153700 1 03/17/56 -01160 - 006 *****78,75 - ****78,75

\$70.00 Filing Fee	\$78.75 Filing Foe & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	
FROM:	Rosendo R. Pena-Ariet			
	Name	(printed or typed)		
	515 N. 46th	Λve.		
		Address		
	Hollywood, FL 33021			
	Ci	ty, State & Zip		
	(305)554-417	70		
	(305)554-417 Daytime	70 Telephone number		
	•			

(Proposed corporate name - must include suffix)

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: Hollywood Community Mental Health, INC.

ARTICLE II PRINCIPAL OFFICE

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

515 N. 46 th Ave. Hollywood, FL 33021

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rosendo R. Pena-Ariet
515 N. 46th Ave.

Hollywood, FL 33021

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Rosendo R. Pena-Ariet	Rosendo V. Pena-Ariot
515 N. 46th Ave.	1036 N.W. 164th Ave.
Hollywood, FL 33021	Pembroke Pines, FL 33021
The undersigned incorporator(s) has(have	executed these Articles of Incorporation this
12 day of September	. 19 ⁹⁶
(An additional article must be added if an e	effective date is requested.)
_m	
_Om	Signature

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

I.	The name of the corporation is:	Hollywood Community Mental Health, INC.			_
2.	The name and address of the registe	ered agent and office is:			
	<u>Rosendo R. I</u>	Pona-Ariet (Name))) 1	-	
	515 N. 46th (P.O. Box	Ave. or Mail Drop Box NOT ACCEPTABLE)		٠ ر ر	
	Hollywood, F	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) September 12, 96 (DATE)