

P96000088191
TRANSMITTAL LETTER

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

200001984592--2
-10/23/96--01096--002
*****70.00 *****70.00

SUBJECT: Assisted Addiction Recovery, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: DAVID GILMORE
Name (printed or typed)

3660 BROADWAY
Address

Fort Myers FL 33901
City, State & Zip

(41) 936-7200
Daytime Telephone number

FILED
95 OCT 23 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B. REGISTER OCT 24 1996

10/21/96

Here's the forms for incorporation and a check. Please
Send them back by **FEDEX**. Find enclosed an
air bill. To pick up call 1-800-60-Fedex.

If you have any questions or need more information
please, call me at (941) 936-7200 or 275-7867.

Thanks .

Don Wilson

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:

Assisted Addiction Recovery, Inc.

ARTICLE II PRINCIPAL OFFICE

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

*800 Seagate Drive, Suite C111
Naples, Florida 33904*

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*DAVID GILMORE
3660 BROADWAY
FORT MYERS FL. 33901*

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TALLAHASSEE, FLORIDA

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):


CHRISTOPHER G. SEARLEY 716 104th Ave N Naples, FL 33963

Margaret Escott 501 Goodlette Rd N, C-111, Naples FL 33940

DAVID Gilmore 3660 BROADWAY Ft. Myers FL

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

20 day of October, 19 96.



Signature



Signature



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.

1. The name of the corporation is: Assisted Addiction Recovery Inc.
2. The name and address of the registered agent and office is:

DAVID GILMORE
(NAME)

3660 BROADWAY
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Fort Myers, Florida 33901
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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)

10/30/91
(DATE)