#### TRANSMITTAL LETTER

# 8000038387

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

200002501892--8 -04/27/98--01138--009 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: _		OLORAL Late name - must include su	PET WORK	- Inc		
		4				
Enclosed is an o	riginal and one(1) copy of the article	s of incorporation and a	a check for :			
☐ \$70.0 Filing F		□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate			
		ADDITIONAL C	OPY REQUIRED			
FROM: ALDELYN LERES - TORRES  Name (Printed or typed)  PER &						
	1180 SW	14Lave	SLCRETARY ALLAHASSE	י י ירד		
	Addre  Hall  City, State	PlonesA & Zip	27 PM 3::07 RY OF STATE SSEE, FLORIDA	ILED.		
	(305) 24	8 3488		•		

APR 2 8 1998 F. CHESSER

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

Daytime Telephone number

#### 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:

South BEHAVIORAL WET WORK, Inc,

ARTICLE II PRINCIPAL OFFICE

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

ONE NORTH KROME AUE

HOMESTEAD FLORIDA 33030

ARTICLE III SHARES

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

1000 e 1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

AIDEMIN LOPEZ - TOIRRES.
1180 SW 141 and
MIAMI, PLONDA 33184

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):

ESTELA CASTANEDA

2690 West 72no Street Healoan Peoresa 33016

ANDERYN LOPEZ-TORRES

1180 Sco-141 are = Mani FLORIDA 33184

The undersigned incorporator(s) has	is(have) executed these	Articles of Incorporation thi
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4 day of 24

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

### Notarization is not required

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 SOUTH BEHAVIORAL NO	DICOORK, Inc
2.	The name and address of the registered agent and office is:	SEC 58.1
	AIDEMN LOPEZ-TORRES	FILE APR 27 F CRETARY O LAHASSEI
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	D OF STATE F. FLORIDA
	MICHUSTATEZED	<b>&gt;</b>

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.