TRANSMITTAL LETTER

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

100002728561--7

-01/04/99--01027--003

*****78.75 *****78.75

SUBJECT: JENNIFER L. GLOCK, PSYCHOLOGICAL CONSULTING, INC. (Proposed corporate name - must include suffix)

Enclo for :	sed is an origina \$70.00 Filing Fee	I and one (1) co x \$78.75 Filing Fee & Certificate	py of the articles of incorporation \$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate Additional Copy Required	
	FROM:		V. STEELY (printed or typed)	DIVISE DIVISE
		1309 St (Johns Bluff Rd N #2 Address	SECRETARY VISION OF CO 99 JAN -4
			i 11e, FL 32225-8339 y, State & Zip	OF STA
		904-92	8-0500 Telephone number	Tions 50
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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:

JENNIFER L. GLOCK, PSYCHOLOGICAL CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

10232 San Jose Boulevard Jacksonville, FL 32257

SECRETARY CORPORATIONS
DIVISION -4 AM 7:50

ARTICLE III SHARES

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

10,000 Shares @ \$1 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LOWELL V. STEELY 1309 St Johns Bluff Rd N #2 Jacksonville, FL 32225-8339

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):

JENNIFER L. GLOCK 3307 Picadelly Lane Jacksonville, FL 32257

The undersigned incorporator(s) has(have	executed these Afficies of incorporation this
29thday of December	, 19 <u>98</u>
Jup 4	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:	JENNIFER L. GLOCK, PSYCHOLOGIC	AL				
	CONSULTING, INC.					
2. The name and address of the registered agent and office is:						
LOWELI	SION OF CI					
1309						
(P.O. I	Box or Mail Drop Box NOT ACCEPTABLE)	7: 51				
Jackso	onville, FL 32225-8339 (CITY/STATE/ZIP)) NS				

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.

Sovell N. Stuly 12-29-98 (DATE)