

Charter Number Only

420102
P0200047586

VALIDATION ONLY

Jeffrey S. Shapiro

Requestor's Name

7805 S.W. 6 COURT

Address

Plantation, FL 33324

City

State

ZIP

Phone

(954)475-0051

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-04/30/02--01009--006
*****70.00 *****70.00

CORPORATION(S) NAME

Recovery First, Inc.



Empire Toll Free: 1-800-432-3028

02 APR 30 AM 3 54
TALLAHASSEE, FLORIDA

02 APR 30 PM 4:07
RECORDS & COMMUNICATIONS SECTION
FLORIDA DEPARTMENT OF BANKING REGULATION

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out
- Pick Up

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

ARTICLES OF INCORPORATION

OF

RECOVERY FIRST, INC.

ARTICLE I

CORPORATE NAME

*The name of the Corporation is: **RECOVERY FIRST, INC.***

ARTICLE II

The Corporation may engage in or transact any or all activity or business permitted under the laws of the United States and of the State of Florida. The Corporation shall provide mental health and substance abuse treatment services along with consulting services in related fields. The Corporation shall exist perpetually.

ARTICLE III

CAPITAL STOCK

*The Corporation is authorized to issue and have outstanding at any one time an aggregate number of **Five hundred (500) shares** of one class of common stock having a par value of **One (\$1.00) Dollar** per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.*

ARTICLE IV

PREEMPTIVE RIGHTS

All shareholders of the Corporation shall be vested with full preemptive rights.

ARTICLE V

INDEMNIFICATION

The Corporation shall indemnify any officer or director, to the full extent permitted by law, except as to suits by any such officer or director against the Corporation.

FILED
02 APR 30 PM 4:07
TALLAHASSEE FLORIDA
SECRETARY OF STATE

ARTICLE VI

**INITIAL REGISTERED AGENT AND
INITIAL REGISTERED AND PRINCIPAL OFFICE**

The Corporation's Initial Registered Agent and Registered Office in the State of Florida is:

INITIAL REGISTERED AGENT: JAMES F. DAVIS

**INITIAL REGISTERED OFFICE: 520 North Victoria Park Road
Fort Lauderdale, Florida 33301**

**INITIAL PRINCIPAL OFFICE OF CORPORATION: 520 North Victoria Park Road
Fort Lauderdale, Florida 33301**

**ACKNOWLEDGMENT AND CONSENT
OF REGISTERED AGENT**

Having been named Initial Registered Agent to accept service of process on the Corporation at the Initial Registered Office designated in these Articles of Incorporation, I hereby accept such status consent to act in this capacity and agree to comply with all the requirements of law pertaining thereto.



**James F. Davis
REGISTERED AGENT**

ARTICLE VII

INITIAL BOARD OF DIRECTORS

*The number of Directors constituting the initial Board of Directors of the Corporation is **ONE (1)**.*

ARTICLE VIII

INITIAL DIRECTORS

The names and addresses of the initial members of the Board of Directors are:

**JAMES F. DAVIS
520 North Victoria Park Road
Fort Lauderdale, Florida 33301**

The number of Directors may be increased or decreased from time to time by By-Laws adopted by the Stockholders.

ARTICLE IX

The names and addresses of the incorporator executing these Articles of Incorporation is:

INCORPORATOR: JAMES F. DAVIS

**ADDRESSES: 520 North Victoria Park Road
Fort Lauderdale, Florida 33301**



**JAMES F. DAVIS
INCORPORATOR**

STATE OF FLORIDA)
 SS
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day before me, a notary public, duly authorized in the State and County above named to take acknowledgments, personally appeared **JAMES F. DAVIS**, to me known to be the person described as the incorporator, and who executed the foregoing Articles of Incorporation.

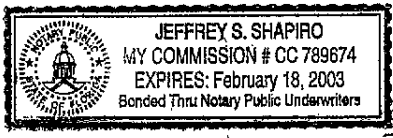
The foregoing instrument was acknowledged before me this 26 day of April, 2002 by James F. Davis, who is personally known to me or who has produced _____, as identification and who did (did not) take an oath.



NAME OF ACKNOWLEDGER; TYPED,
PRINTED OR STAMPED

Jeffrey S. Shapiro

NOTARY PUBLIC, STATE OF FLORIDA



My Commission Expires:

FILED
02 APR 30 PM 4:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA