

STATE OF ALABAMA

**DOMESTIC BUSINESS CORPORATION
CERTIFICATE OF FORMATION**

PURPOSE: In order to form a Business Corporation (formerly known as For-Profit Corporation) under Section 10A-1-3.05 and 10A-2-2.02 of the Code of Alabama 1975 this Certificate Of Formation and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the corporation's initial registered office is located. **The information required in this form is required by Title 10A.**

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the corporation's registered office is/will be located. Contact the Judge of Probate's Office to determine the county filing fees. **Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00** and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is recorded. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your filing will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored (\$30.00 fee).



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Shelby Cnty Judge of Probate AL
03/22/2019 02:18:48 PM FILED/CERT

(For County Probate Office Use Only)

This form must be typed or laser printed.

1. The name of the corporation (must contain the word "corporation" or "incorporated," or the abbreviation of one of those words, and comply with Code of Alabama Title 10A-1-5.04):

Alabama Clinical and Counseling Services, LLC

2. **A copy of the Name Reservation certificate from the Office of the Secretary of State must be attached.**

(For SOS Office Use Only)

This form was prepared by: (type name and full address)

DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

3. Street (**No PO Boxes**) address of principal office of the corporation: 305 Fran Ln. Alabaster, AL 35007

Mailing address of principal office (if different from street address): _____

4. The name of the Registered Agent: Mona Lisa Peterson

Street (**No PO Boxes**) address of Registered Agent: 305 Fran Ln. Alabaster, AL 35007

Mailing address of Registered Agent (if different from street address): _____

5. Purpose for which corporation is formed: to provide counseling, behavioral health services.

_____ ; the purpose includes the transaction of any lawful business for which corporations may be incorporated in Alabama under Title 10A, Chapter 2 of the Code of Alabama.

6. Number of Shares the corporation is authorized to issue: 0 Par Value _____
(Par value is optional information and does not have to be completed.)

7. Period of duration shall be perpetual unless stated otherwise by an attached exhibit.

8. The name(s) of the Incorporator(s): _____

Street (**No PO Boxes**) address of Incorporator(s): _____

_____ Mailing address of Incorporator(s) – (if different from street address): _____

Attach a listing if more Incorporators need to be added.

9. Director's Name: _____

Street (**No PO Boxes**) address of Director: _____

_____ Mailing address of Director(s) - (if different from street address): _____

DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

Director's Name: Mona Lisa Peterson

Street (**No PO Boxes**) address of Director: 305 Fran Ln. Alabaster, AL 35007

_____ Mailing address of Director(s) - (if different
from street address): _____

Director's Name: _____

Street (**No PO Boxes**) address of Director: _____


_____ Mailing address of Director(s) - (if different
from street address): _____

Attach listing if more Directors need to be added.

10. A director has no liability to the corporation or its shareholders for money damages for any action taken, or any failure to take any action, as a director, except liability for (A) the amount of financial benefit received by a director to which he or she is not entitled; (B) an intentional infliction of harm on the corporation or the shareholders; (C) a violation of Section 10A-2-8.33; (D) an intentional violation of criminal law; or (E) a breach of the director's duty of loyalty to the corporation or its shareholders.

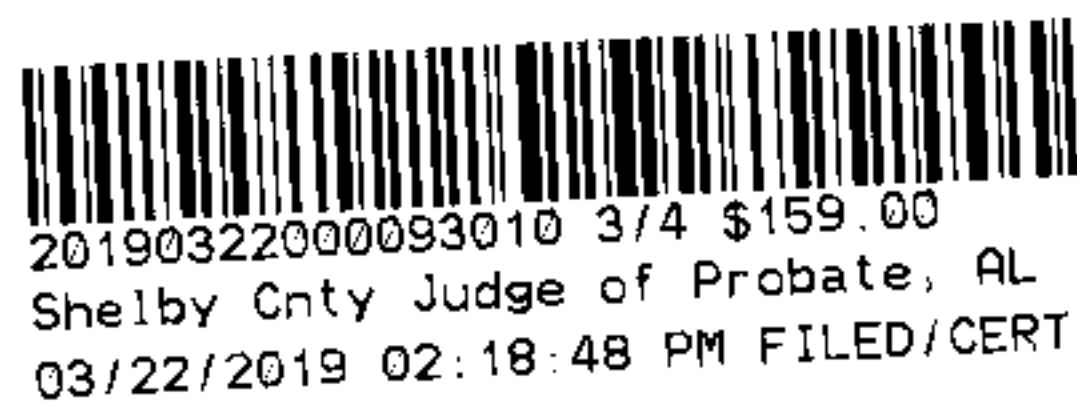
☐ Attached are any other provisions that are not inconsistent with law relating to organization, ownership, governance, business, or affairs of the corporation.

03 / 22 / 2019
Date (MM/DD/YYYY)


Signature as required by 10A-2-1.20

Mona Lisa Peterson
Typed Name of Above Signature

Owner/Director
Typed Title/Capacity to Sign under 10A-2-1.20



John H. Merrill
Secretary of State

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Shelby Cnty Judge of Probate, AL
03/22/2019 02:18:48 PM FILED/CERT

P.O. Box 5616
Montgomery, AL 36103-5616

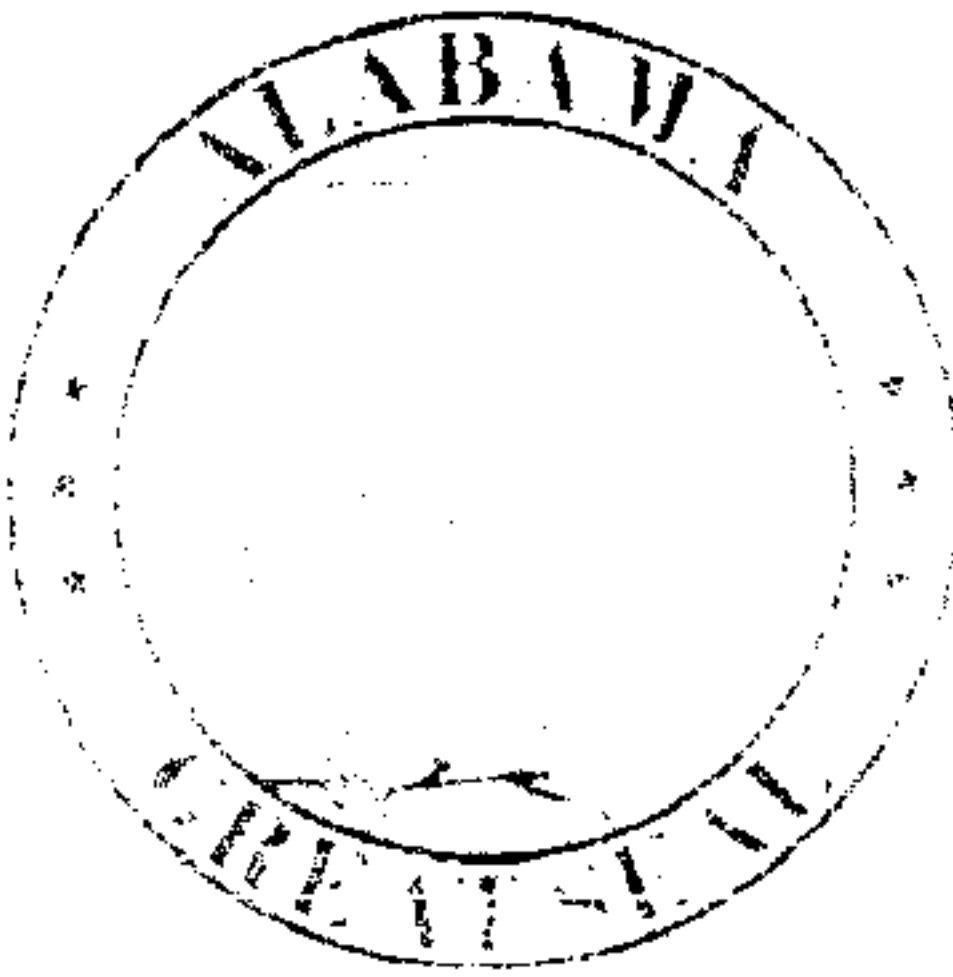
STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama
1975, and upon an examination of the entity records on file in this office, the
following entity name is reserved as available:

Alabama Clinical and Counseling Services, LLC

This name reservation is for the exclusive use of Mona Lisa Peterson, 305 Fran
Ln., Alabaster, AL 35007 for a period of one year beginning March 22, 2019 and
expiring March 22, 2020



RES833582

**In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.**

March 22, 2019

Date

A handwritten signature in black ink that reads "J. H. Merrill".

John H. Merrill

Secretary of State