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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
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FLORIDA PROFIT CORPORATION OR P.A.

PINES NEUROLOGICAL ASSOCIATES INC.

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Articles of Incorporation

Article 1: Name of Corporation: **PINES NEUROLOGICAL ASSOCIATES INC.**


Address of Corporation: **924 OPAL TERRACE
WESTON, FLORIDA 33326**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **100**, with a par value of **1.00**.

Article 3: REGISTERED AGENT: **DAVID ROBBINS**

REGISTERED OFFICE: **924 OPAL TERRACE
WESTON, FLORIDA 33326**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

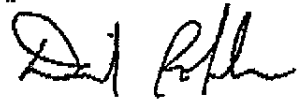
Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

- 1. **DAVID ROBBINS, 924 OPAL TERRACE, WESTON, FLORIDA 33326**
- 2.
- 3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**DAVID ROBBINS
924 OPAL TERRACE
WESTON, FLORIDA 33326**

In witness whereof, I have subscribed my name:



Signature of Incorporator

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