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Incorporate

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
Comprehensive Neurological Care P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
APPROVAL AND SERVICES

# Articles of Incorporation

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

***Comprehensive Neurological Care P.A.***

## ARTICLE II PRINCIPAL OFFICE

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

***20350 Cozumel Ct, Boca Raton, FL 33498***

## ARTICLE III PURPOSE

The purpose for which this corporation is organized is:

***The Profession of Medicine***

## ARTICLE IV SHARES

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

***200 No Par Value***

## ARTICLE V INITIAL DIRECTORS/OFFICERS AND STREET ADDRESS

The name and address of the initial directors/officers is:

***Nina Tsakadze, President, 20350 Cozumel Ct, Boca Raton, FL 33498***

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

***Nina Tsakadze, 20350 Cozumel Ct, Boca Raton, FL 33498***

## ARTICLE VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

***Nina Tsakadze, President, 20350 Cozumel Ct, Boca Raton, FL 33498***

Having been named as registered agent to accept service of process for the above stated corporation at the place designed in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

March 1, 2021

***s/Nina Tsakadze***  
Nina Tsakadze  
***Registered Agent***

***s/Nina Tsakadze***  
Nina Tsakadze  
***Incorporator / President***

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