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FOREIGN PROFIT/NONPROFIT CORPORATION

Innovative Neurotronics, Inc.

Certificate of Status	0
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607 1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANACT BUSINESS IN THE STATE OF FLORIDA

1. Innovative Neurotronics, Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-0462819
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. November 24, 2003 5. perpetual
(Date of incorporation) (Duration: Year corp will cease to exist or "perpetual")

6. Transaction of business in Florida to commence September 1, 2006
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607 1501 & 607 1502, F S., to determine penalty liability)

7. Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814
(Principal office address)
Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814
(Current mailing address)

8. Any and all lawful business for which corporations may be authorized to transact business in Florida.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1206 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System
By: Mary Lou Mulkeen
(Registered agent's signature) **Mary Lou Mulkeen**
Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: N/A

Address: _____

Vice Chairman: N/A

Address: _____

Director: Ivan R. Sabel

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

Director: George E. McHenry

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

B. OFFICERS

President: Jeff Martin

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

Vice President: Thomas F. Kirk

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

Secretary: George E. McHenry

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

Treasurer: George E. McHenry

Address: Two Bethesda Metro Center, Suite 1200, Bethesda, MD 20814

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13  _____
(Signature of Director or Officer listed in number 12 of the application)

14 Jeff Martin, President _____
(Typed or printed name and capacity of person signing application)

Delaware

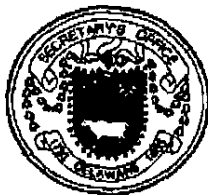
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INNOVATIVE NEUROTRONICS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF AUGUST, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4988791

DATE: 08-21-06