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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 26, 2004

VICTOR NEWMAN 4900 BEED RD., STE. 306 COLUMBUS, OH 43220

SUBJECT: NEURO-STRUCTURAL ANALYSIS, LTD.

Ref. Number: W04000039385

We have received your document for NEURO-STRUCTURAL ANALYSIS, LTD. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 404A00061600

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TRANSMITTAL LETTER

| TO: | Registration Section Division of Corporation | S | | |
|--------|--|---|---|-------------------------------|
| SUBJ | ECT: Neuro- | STRUCTURAL AN (Name of Limit | JALYSIS LTD. ed Liability Company) | |
| Florid | nclosed "Application by F a," Certificate of Existency ty company to transact bu | e, and check are sub | ility Company for Authorization to Transact mitted to register the above referenced foreign | Business in in limited |
| Please | return all correspondence | e concerning this ma | tter to the following: | |
| | _ | VICTO (Nam | or Newman e of Person) | |
| | | VICTOR NEW | MAN & COMPANY, LLC | |
| | | 4900 REED | Address) | - |
| | | Columbus (City/Stat | , OH 43220 e and Zip Code) | |
| For fu | rther information concern | ing this matter, pleas | se call: | |
| | Victor (Name of | JEWMAN Person) | at (614) 459 - 4754 (Area Code & Daytime Telephone Numb | er) |
|)- | STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines Street Tallahassee, Florida 323 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | 74 MON 18 PM 2: |
| Enclo | sed is a check for the follo | owing amount: | | 5 8 |
| | □ \$125.00 Filing Fee □ | \$130.00 Filing Fee & Certificate of S | ■\$155.00 Filing Fee & □\$160.00 Filing Fee, Cotatus Certified Copy of Status & | Certificate Certified Copy |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | IPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIC DLIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
|----------------------|--|
| 1 | NEURO - STRUCTURAL ANALYSIS LTD., LLC. (Name of Foreign Limited Liability Company) |
| | (Name of Poleign Limited Ligoting Company) |
| 2. (Juris comp | STATE OF OHIO diction under the law of which foreign limited liability any is organized) 3. 31-1617599 (FEI number, if applicable) |
| 4 | (Date of Organization) 5. 2038 (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6 | APRIL, 2003 (Date first transacted business in Florida, if prior to registration.) |
| | (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. <u> </u> | UNIVERSITY CENTER FOR BUSINESS, STE 180 |
| | |
| <u> </u> | 10500 LINIVERSITY CENTER DR. TAMPA FL 33(612. (Street Address of Principal Office) |
| | (Street Address of Principal Office) |
| 3. If li | mited liability company is a manager-managed company, check here |
| . The | name and usual business addresses of the managing members or managers are as follows: |
| | DR. RONALD F. MERVIS |
| | UNIVERSITY CENTER FOR BUSINESS, STE 180 |
| | 10500 UNIVERSITY CENTER DRIVE, TAMPA, FL 33612 |
| he jurisc | ched is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records liction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, on of the certificate under oath of the translator must be submitted.) |
| 1. Na | ture of business or purposes to be conducted or promoted in Florida: |
| | MEDICAL RESEARCH & EDUCATION 19 |
| | De lone d'Engenso |
| | Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) |
| | DR RONALD F. MERVIS |
| | Typed or printed name of signee |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of the Limited Liability Company is: | |
|--|----------------|
| NEURO-STRUCTURAL ANALYSIS, LTD., LLC | |
| 2. The name and the Florida street address of the registered agent and office are: | |
| DR. RONALD F. MERVIS | |
| UNIVERSITY CENTER FOR BUSINESS, STE 180 | |
| 10500 UNIVERSITY CENTER DR. | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| TAMPA FL 33612 | - |
| City/State/Zip | |
| Having been named as registered agent and to accept service of process for the above stated limit liability company at the place designated in this certificate, I hereby accept the appointment as reagent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. | gistered es |
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| D: Rosed F. Merros (Sighature) | 180 |
| | 04 NOV 18 |
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| \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Conv (ontional) | 2:58 |

\$ 5.00 Certificate of Status (optional)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show NEURO-STRUCTURAL ANALYSIS, LTD., an Ohio Limited Liability Company, Registration Number 1032523, was organized within the State of Ohio on September 22, 1998, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 20th day of October, A.D. 2004

Ohio Secretary of State

Validation Number: V20042930E74A7