2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000000182

FILED Nov 04, 2010 Secretary of State

Entity Name: INSTITUTE OF PAIN MANAGEMENT EDUCATIONAL AND RESEARCH FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1325 SAN MARCO BLVD., SUITE 401 4243 SUNBEAM ROAD, SUITE 3 JACKSONVILLE, FL 32257 4243 SUNBEAM ROAD, SUITE 3

Current Mailing Address: New Mailing Address:

1325 SAN MARCO BLVD., SUITE 401 4243 SUNBEAM ROAD, SUITE 3 JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32257

FEI Number: 80-0152925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRILEY, D. RANDALL 135 PROFESSIONAL DRIVE, SUITE 101 PONTE VEDRA BEACH, FL 32082 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: D. RANDALL BRILEY

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: FLORETE, ORLANDO G JR.
Address: 2200 ACADIE DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: T

 Name:
 GUTHRIE, TRAVIS B

 Address:
 2800 OAK STREET

 City-St-Zip:
 JACKSONVILLE, FL 32205

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ORLANDO G. FLORETE JR. D

Electronic Signature of Signing Officer or Director

11/04/2010 Date