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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

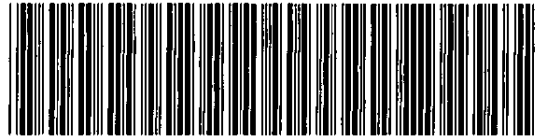
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09 JAN 26 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVAL  
AND  
FILED

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## **COVER LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT: Neurologique Foundation, Inc.**

**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

⌚ \$87.50

Filing Fee,

Certificate of & Certified Copy

### **ADDITIONAL COPY REQUIRED**

**FROM:**

Sonsoles Robles  
221 Stellar Court  
Ponte Vedra Beach, FL 32082-4040  
Daytime Tel. (904)687-7879

**NOTE: Please provide the original and one copy of the articles.**

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AND  
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## ARTICLES OF INCORPORATION

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In Compliance with Chapter 617, F.S., (Not for Profit)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **ARTICLE I NAME**

*The name of the corporation shall be:*

Neurologique Foundation, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

*The principal street address and mailing address, if different is:*

221 Stellar Court  
Ponte Vedra Beach, FL 32082-4040

### **ARTICLE III PURPOSE**

*The purpose for which the corporation is organized is:*

This corporation is organized and operated exclusively for charitable, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code or the corresponding provision of any future federal tax law, as follows: it stands on three main pillars of patient-centered care, education and research, backed up by a foundation of quality assurance, all built for the improvement of empathetic neurological care for the entire community.

The period of duration of this corporation is perpetual.

No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and this corporation shall not participate in, or intervene in any political campaign on behalf of, or in opposition to, any candidate for public office.

No part of the net earnings of this corporation shall inure to the benefit of, or be distributed to, its members, directors, or other private persons, except that this corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in these articles.

Notwithstanding any other provision of these articles, this corporation shall not carry on any other activities not permitted to be carried on (1) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code.

Upon the dissolution or winding up of the corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for educational purposes and which has established its tax-exempt status under Section 501(c)(3) of the Internal Revenue Code.

RA Initials:

SR  
1/21/9

Incorporator Initials:

SR  
1/21/9

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV MANNER OF ELECTION**

*The manner in which the directors are elected or appointed:*

As provided for in the bylaws.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

*List name(s), address(es) and specific title(s):*

(1)- Sonsoles Robles  
221 Stellar Court  
Ponte Vedra Beach, Fl 32082

(2)- Yahaira Moore  
Rt 2 Box 443  
Lakeland, GA 31635

(3)- Yumira McQuain  
4403 Bridgevillage Dr.  
Spring, TX 77373

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:*

Sonsoles Robles  
221 Stellar Court  
Ponte Vedra Beach, Fl 32082-4040

**ARTICLE VII INCORPORATOR**

*The name and address of the Incorporator is:*

Sonsoles Robles  
221 Stellar Court  
Ponte Vedra Beach, Fl 32082-4040

\*\*\*\*\*

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

Sonsoles Robles  
Signature/Registered Agent

Sonsoles Robles  
Signature/Incorporator

Date

Date