TRANSMITTAL LETTER Department of State TRANSMITTAL LETTER Department of State

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

SUBJECT:		ENCE PESE te name - must include suffi		ISTITUTE
	(1 toposed corpora	ice name - must medde sum		NC
			20000253 -05/20/98 ****131.	
Enclosed is an original a	and one(1) copy of the article	s of incorporation and a	check for :	4
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM	: NEUROS CE Name (Pri	ENCE DESC inted or typed)	EAREN H	LISTITUTE NC
FROM	Name (Pri	ENCE DESC inted or typed) STREET		HC -
FROM	Name (Pri 254 9 th Ac WEST PALM	STREET		WATTOTE AC

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 22, 1998

NEUROSCIENCE RESEARCH INSTITUTE INC. 254 9TH STREET WEST PALM BEACH, FL 33401

SUBJECT: NEUROSCIENCE RESEARCH INSTITUTE INC.

Ref. Number: W98000011817

We have received your document for NEUROSCIENCE RESEARCH INSTITUTE INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

Please return the original and one copy of 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) 487-6933.

Dana Calloway Document Specialist

Letter Number: 298A00029099

P.S.

SORRY FOR INCONVINIENCE.

PLEASE FILED A. S. A. P.

WE APORITIATE YOUR ATTANTION

Lilian July

SO HA CO HO OF THE PARTY OF THE

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME
The name of the corporation shall be:
The name of the corporation shall be: NEUROSCIENCE RESEARCH INSTITUTE, INC.
•
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
MENBOSPIENCE RESEARCH INSTITUTE INC
HEUROSCIENCE REJEARCH INSTITUTE INC 254 9 th street WEST PALM BEACH FL 33401
ARTICLE III PURPOSE(S) The specific purpose(s) for which the corporation is organized is(are):
SCIENTIFIC RESEA-OIL
ARTICLE IV MANNER OF ELECTION OF DIRECTORS
The manner in which the directors are elected or appointed is:
34 FOUNDERS VOTES
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
LILIANA MATIC, SEGUSO
254 9th STORES
AND DOLLEY TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE
WEST DALM BEACH - FL 33401 FG &
The rame and address of the Incompositor to these Articles of Incomposition and
The name and address of the Incorporator to these Articles of Incorporation are:
LILIANA MATIC SEGUSO - FOUNDERS CON SER SIS 3401
MIRJANA DAVLOVIC - TOURINE
LOUID DELLO-FOUNDERS Now-16 37990
IN TO BUTCH
Signature/Incorporator Date
(An additional article must be added if an effective data in negree to d
(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties,

and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date /