

**PD1000037897**  
**STEVEN L. ROBBINS, P.A.**  
**Attorneys & Counselors at Law**

11911 U. S. HIGHWAY ONE, SUITE 209  
NORTH PALM BEACH, FLORIDA 33408

**Direct Mail to:**  
P. O. Drawer 33118  
Palm Beach Gardens, FL 33420-3118

Business, Real Estate,  
Personal Injury, and  
Construction Litigation

**Of Counsel:**  
Thomas L. Spall, Esquire  
Criminal Law, Family Law

Ph. (561) 630-3110

EMAIL: [esquire@evcom.net](mailto:esquire@evcom.net)

Fax (561) 624-7198

March 28, 2001

500003944265-7  
-04/02/01-01159-002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Florida Secretary of State  
Division of Corporations  
409 E. Gains Street  
Tallahassee, FL 32399

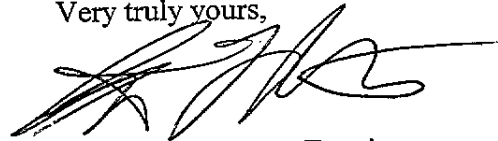
Re: St. Lucie Pain Center, Inc.

Dear Sir/Madam:

Enclosed please find an original and one copy of Articles of Incorporation for the above-referenced corporation **to be filed**, together with my check in the amount of \$70.00, representing the filing fees. Kindly provide the undersigned with a file-stamped copy of the Articles once they have been filed, along with the Charter page, in the self-addressed, stamped envelope enclosed for your convenience.

Thank you for your attention to this matter. If you should have any questions or require any additional information, please do not hesitate to contact us.

Very truly yours,



Steven L. Robbins, Esquire,  
For the Firm

Enclosures

01 APR 13 PM 2:56  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-13-01  
we



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 5, 2001

STEVEN L. ROBBINS, ESQ.  
P. O. DRAWER 33118  
PALM BCH GARDENS, FL 33420-3118

SUBJECT: ST. LUCIE PAIN CENTER, INC.  
Ref. Number: W01000007683

We have received your document for ST. LUCIE PAIN CENTER, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

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) 487-6995.

Wanda Cunningham  
Document Specialist  
New Filing Section

Letter Number: 801A00020222

*AS Revised, Please file the  
original and return a time/date stamped  
copy to me in the envelope provided via  
overnight mail.*

**ARTICLES OF INCORPORATION  
OF  
ST. LUCIE PAIN CENTER, INC.**

**ARTICLE I. NAME**

The name of this corporation shall be **ST. LUCIE PAIN CENTER, INC.**

**ARTICLE II. COMMENCEMENT & DURATION**

The commencement of this corporation's existence shall be at the time of the filing of these Articles of Incorporation by the FLORIDA DEPARTMENT OF STATE. This corporation's duration shall be perpetual.

**ARTICLE III. PURPOSES, POWERS, & RIGHTS**

This corporation is being organized for the purpose of engaging in any lawful act or activity for which corporations may be organized under the laws of the State of Florida.

In furtherance of its corporate purposes, this corporation shall have all of the general and specific powers and rights granted to and conferred on a corporation by laws of the State of Florida.

**ARTICLE IV. CAPITAL STOCK**

This corporation shall have the authority to issue **10,000,000 shares of common capital stock**, with a par value of \$.001 per share.

**ARTICLE V. PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash by this corporation of any shares of new capital stock of the same kind, class, or series, as that which the shareholder already holds, shall have the preemptive right to purchase a pro rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which such shares are offered to others.

**ARTICLE VI. BOARD OF DIRECTORS**

The number of directors on this corporation's Initial Board Of Directors shall be **one**. The number of directors may be increased or decreased from time to time, as provided in this corporation's bylaws, but shall never be less than one.

- A. All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation shall be managed under the direction of, the Board Of Directors, except as otherwise herein provided or reserved to the holders of common stock.

STEVEN L. ROBBINS, ESQUIRE  
11911 U. S. Hwy. One, Ste 306  
North Palm Beach, FL 33408  
FL Bar No. 0710288  
561-630-3110 / Fax 561-624-7198

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- B. 1. As indicated above, the number of members of the Board Of Directors may be increased from time to time, as provided in this corporation's bylaws, but (subject to vacancies) in no event may there be less than one director. Each director shall serve until the next annual meeting of shareholders.
2. If any vacancy occurs in the Board Of Directors during a term, the remaining directors, by affirmative vote of a majority thereof, may elect a director to fill the vacancy until the next annual meeting of shareholders.
3. The name(s) and mailing address(es) of the person(s) who shall serve as director(s) of the corporation until the first annual meeting of the shareholders are as follows:

MR. GARY CARROLL  
c/o Steven L. Robbins, Esquire  
11911 U. S. Highway One, Suite 306  
North Palm Beach, Florida 33408

#### **ARTICLE VII. DIRECTOR & SHAREHOLDER ACTION BY CONSENT**

Any corporate action upon which a vote of directors (or a committee thereof) or shareholders is required or permitted may be taken without a meeting or vote of directors or shareholders with the written consent of not less than a majority of directors or shareholders having not less than a majority of all of the stock entitled to vote upon the action if a meeting were held; provided, that in no case shall the written consent by holders have less than the minimum percent of the vote required by statute for the proposed corporate action and provided that prompt notice be given to all directors and shareholders of the taking of corporate action without a meeting and by less than unanimous written consent.

#### **ARTICLE VIII. INDEMNIFICATION**

This corporation shall indemnify any officer, director, employee, or agent, and any former officer, director, employee, or agent, to the full extent permitted by law.

#### **ARTICLE IX. PRINCIPAL OFFICE & INITIAL REGISTERED OFFICE & AGENT**

The address of this corporation's principal office, and the address of this corporation's initial registered office (and the name of the individual who shall serve as this corporation's initial registered agent at that address), respectively, are:

Corporation's Principal Address:  
1591 S. E. Pt. St. Lucie Blvd.  
Pt. St. Lucie, Florida 34952

Registered Agent:  
Steven L. Robbins, Esquire  
11911 U. S. Highway One, Suite 306  
North Palm Beach, Florida 33408

## ARTICLE X. INCORPORATOR

The name and address of the individual who shall serve as this corporation's incorporator are: Mr. Steven L. Robbins, as Trustee, 11911 U. S. Highway One, Suite 306, North Palm Beach, Florida 33408.

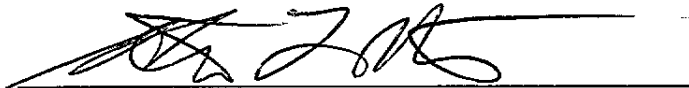
## ARTICLE XL AMENDMENT

This corporation reserves the right to amend or repeal any provisions of these Articles of Incorporation, or any amendments hereto, in the manner now or hereafter prescribed by statute. Any rights conferred upon the shareholders are granted subject to this reservation.



Steven L. Robbins, Trustee - Incorporator

I hereby accept my designation as resident agent and agree to serve as the resident agent of ST. LUCIE PAIN CENTER, INC. I hereby state that I am familiar with and accept the duties and responsibilities as registered agent for the Corporation.

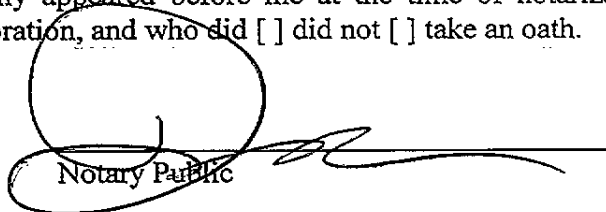


Steven L. Robbins, Esquire - Registered Agent

State Of FLORIDA

County Of PALM BEACH By

On 4/10, 2000, Steven L. Robbins, as Trustee, designated above as the individual who shall serve as the corporation's incorporator, who is personally known to me, or produced a FLORIDA driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles Of Incorporation, and who did ☐ did not ☐ take an oath.



Notary Public

(Notary Public, Printed Or Typed Name)  
My Commission # CC875091 EXPIRES  
September 28, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

Commission Expiration Date & Commission Number:

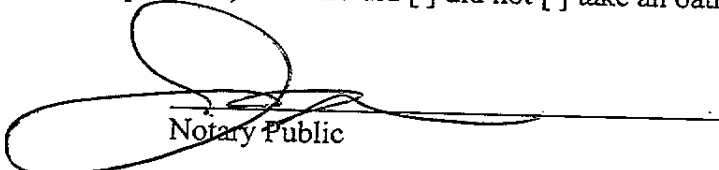
(SEAL)

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North Palm Beach, FL 33408  
FL Bar No. 0710288  
561-630-3110 / Fax 561-624-7198

State Of FLORIDA

County Of PALM BEACH B-1-

On 4/10/ 2000, Steven L. Robbins, Esquire, designated above as the individual who shall serve as the corporation's initial registered agent, who is personally known to me, or produced a FLORIDA driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles Of Incorporation, and who did [ ] did not [ ] take an oath.

  
Notary Public

(Notary Public - Printed Or Typed Name)

Commission Expiration Date & Commission Number:



MY COMMISSION # CC875091 EXPIRES  
September 28, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

(SEAL)

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