250 AUSTRALIAN AVENUE

WEST PALM BEACH, FLORIDA 33401

(561) 471-9000

EDGAR S. MOSHER (1878-1939) ESTHER MOSHER SCHNEIDER (1906-1977) GEORGE A. SCHNEIDER (1906-1985) JOHN C. SCHNEIDER

June 7, 2002

Re: CNS MANAGEMENT, INC.

Corporate Records Bureau Division of Corporations Department of State 409 East Gaines Street Tallahassee, Florida 32399

Gentlemen:

Enclosed are the following documents for the formation of the above-named corporation:

- Articles of Incorporation (signed by the Registered Agent); 1.
- 2. Copy of Articles;
- 3. Check for \$70.00 for filing the Articles; and

*****70.00 *****70.00

4. Self-addressed return envelope.

Please arrange for the filing of the Articles of Incorporation and return the copy (to be certified by your Department) in the enclosed self-addressed envelope.

Thank you in advance for your assistance and cooperation.

Very truly yours,

John C. Schneider

Johneschneider

JCS/csm Enclosures

ARTICLES OF INCORPORATION

OF

CNS MANAGEMENT, INC.

OZ JUN 10 PM 4: 05
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

The undersigned Incorporator hereby adopts the following Articles of Incorporation for the purpose of forming a corporation pursuant to the Florida Business Corporation Act.

ARTICLE I

Name

The name of the Corporation ("Corporation") shall be:

CNS MANAGEMENT, INC.

ARTICLE II

Address of Principal Office

The principal place of business and mailing address of the Corporation shall be:

c/o John C. Schneider, Esquire 1550 Clearlake Centre 250 Australian Avenue South West Palm Beach, FL 33401

ARTICLE III

<u>Purpose</u>

This Corporation is organized for the purpose of transacting any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE IV

Duration

This Corporation shall have perpetual existence.

ARTICLE V

Shares

The number of shares that this Corporation is authorized to have outstanding at any one time is 10,000, each with a par value of One Dollar (\$1.00).

ARTICLE VI

Registered Agent

The street address of the Corporation's initial registered office and the name of its initial Registered Agent at that address are as follows:

John C. Schneider, Esquire Mosher and Schneider, P.A. 1550 Clearlake Centre 250 Australian Avenue South West Palm Beach, FL 33401

ARTICLE VII

Board of Directors

A Director is not required to be a resident of the State of Florida or a Shareholder of the Corporation.

ARTICLE VIII

Incorporator

The name and street address of the Incorporator named in these Articles of Incorporation are:

John C. Schneider, Esquire Mosher and Schneider, P.A. 1550 Clearlake Centre 250 Australian Avenue South West Palm Beach, FL 33401

IN WITNESS WHEREOF, these Articles of Incorporation have been executed by the Incorporator this 7th day of June, 2002.

Incorporator

STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 7th day of June, 2002, by John C. Schneider, who is personally known to me and who did not take an oath.

Cindy S. Moore
MY COMMISSION # CC861541 EXPIRES
August 25, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

Votary Public

State and County Aforesaid My Commission Expires:

<u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: CNS MANAGEMENT, INC.
- 2. The name and address of the registered agent and office are:

John C. Schneider, Esquire Mosher and Schneider, P.A. 1550 Clearlake Centre 250 Australian Avenue South West Palm Beach, FL 33401 02 JUN 10 PH 4: 05
SECRETARY OF STATE
TALLAHASSEE, FLORID

Signature

Johnes dinudes

Title

Incorporator

Date

June 7, 2002

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 AN FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature

Johnstelmeiden

Date

June 7, 2002