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To:
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From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

FLORIDA PROFIT CORPORATION OR P.A.

GULF STREAM NEUROLOGY, P.A.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Gulf Stream Neurology, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

933 Clint Moore Road, Boca Raton, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Neurological and Radiological Diagnostic Test Interpretation

ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares of common stock with no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nils Anderson, M.D., President, Secretary and Director
2111 Sprucewood Lane
Lindenhurst, IL 60046

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

Rick Hinden
933 Clint Moore Road
Boca Raton, FL 33487

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Shelley L. Clifford, Paralegal
Gardner Carton & Douglas LLP
191 N. Wacker Dr., Suite 3700
Chicago, IL 60610-1698

****

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.

Signature/Registered Agent — 4/30/04 Date

Signature/Incorporator — 4/23/04 Date