

P05000006921

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000010336 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
05 JAN 13 AM 9:26
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

neuro sleep care center corp

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

1-14-05

④

H050000010336

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NEURO SLEEP CARE CENTER CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2653 SW 27 AVE MIAMI FL 33133

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**ORESTEBAN CARABEO
2653 SW 27 AVE
MIAMI FL 33133**

FILED

05 JAN 13 AM 9:24

TALLAHASSEE, FL 32302

H050000010336

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ORESTEBAN CARABEO
2653 SW 27 AVE
MIAMI FL 33133


ARTICLE VI OFFICERS


PRESIDENT ALINA ANGLADE 50%
VICEPRESIDENT ORESTEBAN CARABEO 50 %

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13 day of January, 2004

(An additional article must be added if an effective date is requested.)



President


Vicepresident

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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.

NEURO SLEEP CARE CENTER CORP

DRESTEBAN CARABEO

2653 SW 27 AVE

(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

MIAMI FL 33133

(CITY/STATE/ZIP)

WILMINGTON, DELAWARE

05 JAN 13 AM 9:24

FILED

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)

01/13/2005

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

1405000010336