

705000121661

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ MAIL

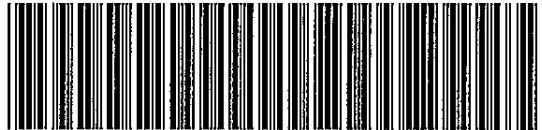
(Business Entity Name)

(Document Number)

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05 SEP -1 AM 11:38 SECRETARY OF STATE
TALLAHASSEE FL 32301

DEPT. OF DEFENSE
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ATTENTION: MR. [illegible]
P.O. BOX 760
FORT MONROE VA 22034-0760

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J. Shivers SEP 05 2005

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. CENTER FOR NEUROLOGICAL STUDY INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

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2.00

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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SECRETARY OF STATE
ATTN: HASSEE, CLORIE

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Examiner's Initials

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: CENTER FOR NEUROLOGICAL STUDY INC

ARTICLE II PRINCIPAL OFFICE

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

8525 S.W. 92 ST SUITE D-16
MIAMI, FL 33156

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TALLAHASSEE FL 32311

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Five (500) hundred shares one dollar (1) per value common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Andres Noguez
11800 S.W. 87Th AVE
MIAMI, FL 33176

ARTICLE V INCORPORATOR(S)

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

Andres Nogues
11800 S.W. 87Th AVE
MIAMI, FL 33176

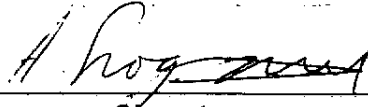
ARTICLE VI DIRECTOR(S)

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

Andres Nogues (President & Secretary)
11800 S.W. 87Th AVE MIAMI, FL 33176

Lisette Nogues (Vice-president)
11800 S.W. 87Th AVE MIAMI, FL 33176

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 30 day of AUGUST, 2005



Signature

Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: CENTER FOR NEUROLOGICAL STUDY INC

2. The name and address of the registered agent and office is:

Andres Nogues

(NAME)

11800 S.W. 87Th AVE

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33176

(CITY/STATE/ZIP)

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

A. Nogues

DATE 08/30/2005

SECRETARY OF STATE
TALLAHASSEE, FL 32399

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