

P87000114104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

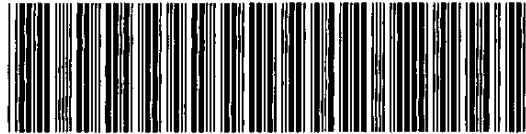
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/12/07--01021--017 **78.75

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2007 OCT 18 P 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-17-07

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: _____

Neurospinal Monitoring, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: _____

Edward John Hammond

Name (Printed or typed)

3324 West University Avenue #200

Address

GAINESVILLE Florida 32607

City, State & Zip

352 - 375 - 4640

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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:

Neurospinal Monitoring, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3324 West University Avenue, #200
GAINESVILLE, Florida 32607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

medical practice

ARTICLE IV SHARES

The number of shares of stock is:

1 share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Edward J. Hammond - President
3324 W. University Ave, #200
Gainesville, Fl. 32607

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2007 OCT 12 P 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Edward J. Hammond
3324 West University Avenue #200
GAINESVILLE Florida 32607



ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edward J. Hammond
3324 West University Avenue #200
GAINESVILLE Florida 32607

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

Date

10/10/07

Signature/Incorporator

Date

10/10/07