

P11000000956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

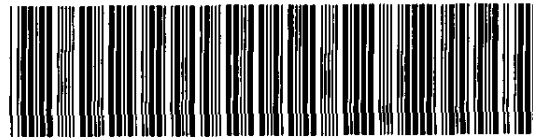
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300189065343

01/05/11--01023--016 **78.75

RECEIVED

11 JAN -5 PM 12:16

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

2011 JAN -5 PM 4:42

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1079 JAN 6 2011

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Innovative Spine Care, Inc.

Signature _____

Requested by: BN

01/05/11 a.m.

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

ARTICLES OF INCORPORATION

of

Innovative Spine Care, Inc.

FILED
2011 JAN -5 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I: NAME

The name of the corporation shall be: Innovative Spine Care, Inc.

ARTICLE II: PURPOSE

This corporation is being organized for the purpose of engaging in the transaction of any and all business activity permitted under the laws of Florida and the United States of America.

ARTICLE III: PRINCIPAL PLACE OF BUSINESS

The principal place of business of the corporation shall be: 7000 Beach Plaza, #901, St. Pete Beach, Florida 33706.

ARTICLE IV: SHARES

All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is: Five Hundred (500), with a par value of \$1.00 per share of common stock.

ARTICLE V: INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name of the initial registered agent is: John P. Perrin, Esq., whose registered office is located at: 2401 West Bay Drive, Suite 424, Largo, Florida 33770.

ARTICLE VI: INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Stephen D. Watson, 7000 Beach Plaza, #901, St. Pete Beach, Florida 33706.

The undersigned incorporator has executed these Articles of Incorporation this 3rd day of January, 2011



Stephen D. Watson, Incorporator

**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to Florida Law, the below-named Corporation organized under the laws of the State of Florida submits the following statement in designating the registered agent/office, in the State of Florida.


1. The name of the corporation is: **Innovative Spine Care, Inc.**
2. The name and address of the initial registered agent and registered office is:

Name: John P. Perrin, Esq.

Address: 2401 West Bay Drive, Suite 424, Largo, Florida 33770.

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 OF REGISTERED AGENT


John P. Perrin, Esq.

DATE: January 3, 2011

FILED
2011 JAN -5 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA