

PI1000053197

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(Business Entity Name)

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2011 JUN -6 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32301

SC
5-18-11

1011000053197444

COVER LETTER

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

SUBJECT: Pain Eliminated, 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: Joseph M Petroski

Name (Printed or typed)

1600 Kanner Hwy S, Unit 103

Address

Stuart, FL 34994

City, State & Zip

651 755 6027

Daytime Telephone number

Joe@PainEliminated.com

E-mail address: (to be used for future annual report notification)

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

2011 JUN -6 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 JUN -6 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 18, 2011

JOSEPH M PETROSKI
1600 KANNER HWY S, UNIT 103
STUART, FL 34994

SUBJECT: PAIN ELIMINATED, INC.
Ref. Number: W11000027444

We have received your document for PAIN ELIMINATED, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on October 29, 2010.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Sharon Collins
Regulatory Specialist II
New Filing Section

Letter Number: 311A00012339

Joseph Petroski
1600 Kanner Hwy S
Unit 103
Stuart, FL 34994

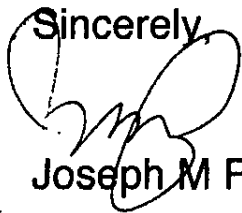
June 3, 2011

Florida Dept OF State
Division of Corporations
Attn: Sharon Collins

To Whom It May Concern:

I Joe Petroski have no intention of revoking the Voluntary
Dissolution of Pain Eliminated, Inc. I release the name.

Sincerely,



Joseph M Petroski

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2011 JUN -6 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FL 32399-0001

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Pain Eliminated, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

1600 Kanner Hwy S Unit 103

Stuart, FL

34994

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting, personal and corporation and any other purpose legal under Florida law.

ARTICLE IV SHARES 1

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joe Petroski President, Vice Preside Name and Title: _____

Address: 1600 Kanner Hwy S Unit 103 Address: _____

Stuart, FL

34994

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Joe Petroski

Address: 1600 Kanner Hwy S, Unit 103

Stuart, FL

ARTICLE VII INCORPORATOR

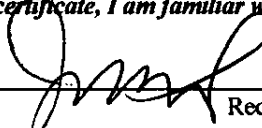
The name and address of the Incorporator is:

Name: Joe Petroski

Address: 1600 Kanner Hwy S Unit 103

Stuart, FL 34994

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



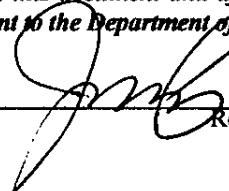
Required Signature/Registered Agent

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2011 JUN -6 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32310

5/6/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

5/6/11

Date