

**Electronic Articles of Incorporation
For**

P18000082627
FILED
October 01, 2018
Sec. Of State
mtmoon

PRO ACTIVE PAIN CARE, P.A.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

PRO ACTIVE PAIN CARE, P.A.

Article II

The principal place of business address:

860 111TH AVE N
STE 4 & 5
NAPLES, FL. US 34108

The mailing address of the corporation is:

860 111TH AVE N
STE 4 & 5
NAPLES, FL. US 34108

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

PHYSICIANS RESOURCE LLC
1042 N US HWY 1
SUITE 8
ORMOND BEACH, FL. 32174

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ROCHELLE R. CANNON

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Article VI

The name and address of the incorporator is:

PHYSICIANS RESOURCE LLC
1042 N US HWY 1
SUITE 8
ORMOND BEACH, FL 32174

Electronic Signature of Incorporator: ROCHELLE R. CANNON

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
MICHAEL MARTINEZ
860 111TH AVE N, STE 4 & 5
NAPLES, FL. 34108 US

Article VIII

The effective date for this corporation shall be:

09/25/2018