

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9471
904-222-7533 FAX

800-342-8086



RECEIVED
6 JAN -5 PM 16
DIVISION OF CORPORATION

ACCOUNT NO. 600001680956

REFERENCE : 793735 10256B

AUTHORIZATION :

Patricia Pyzdek

COST LIMIT : \$ 70.00

ORDER DATE : January 5, 1996

600001680956

ORDER TIME : 12:55 PM

ORDER NO. : 793735

CUSTOMER NO: 10256B

CUSTOMER: Walt Blenner, Esq
GLENN REESER & BLENNER

Suite 701
2708 Alternate 19 N.
Palm Harbor, FL 34683

DOMESTIC FILING

NAME: NEUROMUSCULAR MANAGEMENT, INC.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol M. Hensal

EXAMINER'S INITIALS: **T. BROWN** JAN - 8 1996

FILED
96 JAN -5 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
NEUROMUSCULAR MANAGEMENT, INC.

FILED
96 JAN -5 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

NEUROMUSCULAR MANAGEMENT, INC.

The address of the principal office of this corporation shall be P.O. Box 5306, Clearwater, Florida 34618, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 7,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS AND DIRECTORS

This corporation shall have one officer and one director, initially. The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed is:

Steven Kantelis	4100 Boyd Street
Dir./Pres.	Palm Harbor, Florida 34684


ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of
Corporation Service Company, has hereunto set their hand
and seal of Corporation Service Company, on January 5, 1996.

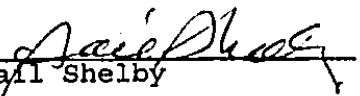
CORPORATION SERVICE COMPANY

By: 
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Florida corporation
to transact business in this State, having a business office
identical with the registered office of the corporation named
above, and having been designated as the Registered Agent in the
above and foregoing Articles, is familiar with and accepts the
obligations of the position of Registered Agent under Section
607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

By: 
Its Agent, Gail Shelby

ACG/cmh

P96000002075

GLENN & BLENNER

ATTORNEYS AND COUNSELORS AT LAW

2708 Alternate 19 N., Suite 701
Palm Harbor, FL 34683
(813) 786-5866
FAX (813) 784-3263

• HARRY M. GLENN
• WALTER W. BLENNER

• Also admitted in Colorado

REPLY TO PALM HARBOR

January 2, 1997

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

900002048499--5
-01/07/97--01110--020
*****35.00 *****35.00

Re: NEUROMUSCULAR MANAGEMENT, INC.

Dear Sir/Madam:

Enclosed you will find the *Statement of Change of Registered Office or Registered Agent or Both for Corporations* form, together with a check in the amount of \$35.00, representing the appropriate filing fee for this service for the above-named corporation.

If you have any questions or require additional information, please do not hesitate to contact me directly. Thank you for your assistance in this regard.

Very truly yours,

GLENN & BLENNER

Walter W. Blenner

WWB:bb:letters/resignat.ra

Enclosures

cc: CSC, Wilmington, DE
CSC, Philadelphia, PA
Donald G. Brown

BA Chg.

VS JAN 15 1997

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent or
both, in the State of Florida.

FILED
97 JAN -6 AM 9:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1a. The name of the corporation is: NEUROMUSCULAR MANAGEMENT, INC.

1b. The mailing address of the corporation is: P. O. Box 5306, Clearwater, FL 34618

1c. Date of incorporation: January 5, 1996 Document number: P 96000002075

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

Corporation Service Company

1201 Hays Street

Tallahassee, Florida 32301

3. The name and address of the new registered agent and office: P.O. Box Not Acceptable

Walter W. Blenner

2708 Alternate 19 North, Suite 701

Palm Harbor, FL 34683

The street address of its registered office and the street address of the business office of its
registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer
so authorized by the board.

(Signature of an officer, chairman or
vice chairman of the board)

12-17-96
(Date)

STEVEN KANTELIS

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated
corporation, 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 relative to the proper and complete
performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent.

(Signature of Registered Agent)

1/3/97
(Date)

If signing on behalf of an entity:

WALTER W. BLENNER

(Typed or Printed Name)

(Capacity)