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PONTEST OF TRANS

NAME: PARKINSON OUTREACH PROGRAM-

FLORUDA, INC.

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FERTIFICATE OF LIMITUD PARTHERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED CORY

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CERTIFICATE OF GOOD STANDING

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ARTICLES OF INCORPORATION

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OF

PARKINSON OUTREACH PROGRAM- FLORIDA, INC.

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:

PARKINSON OUTREACH PROGRAM- FLORIDA, INC.
The address of the principal office of this corporation shall
be 2929 East Commercial Boulevard, #306, Fort Lauderdale, Florida
33308 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 1,000 shares of common stock having no par value per share.

ARTICLE IV. REGISTERED AGENT

The atreet 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. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The names and addresses of the initial members of the Board of Directors are:

Ralph Rosenberg

2929 East Commercial Boulevard #306 Fort Lauderdale, Florida 33308

ARTICLE VII. INCORPORATOR

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

Corporate Agents, Inc. 1201 Hays Street Tallahassee, Florida 32301

The undersigned incorporator has executed these Articles of Incorporation on April 10, 1996.

It's Agent, Deborah'D. Skipper Incorporator

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized 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.

By: Meliotah O. Skipper
It's Agent, Deborah D. Skipper
Authorized Service Representative
Corporation Service Company

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Examiner's Initials

Other

CERTIFICATE OF CHANGE OF REGISTERED OFFICE

AND REGISTERED AGENT OF

PARKINSON OUTREACH PROGRAM - FLORIDA, INC.

Parkinson Outreach Program - Florida, Inc., pursuant to Section 607.0502 of the Florida Statutes, hereby changes its Registered Office and Agent as follows:

- 1. The name of the corporation is Parkinson Outreach Program Florida, Inc.
- 2. The street address of its present Registered Office is 1201 Hays Street, Tallahassee, Florida, 32301.
- 3. The street address to which the Registered Office is to be changed is 100 N.E. 3rd Avenue, Suite 400, Fort Lauderdale, Florida, 33301.
- 4. The name of the present Registered Agent is Corporation Service Company.
- 5. The name of the new Registered Agent is Leonard K. Samuels.
- 6. The street address of the new Registered Office and the street address of the business office of the new Registered Agent is 100 N.E. 3rd Avenue, Suite 400, Fort Lauderdale, Florida, 33301.
- 7. That such change was authorized by Resolution duly adopted by its Board of Directors.

IN WITNESS WHEREOF, the undersigned has executed this Certificate the ______ day of October, 1996.

PARKINSON OUTREACH PROGRAM - FLORIDA, INC.

RALPH ROBENBERG

ACCEPTANCE OF DEBIGNATION AS REGISTERED AGENT

I hereby accept the appointment as Registered Agent of PARKINSON OUTREACH PROGRAM - FLORIDA, INC., as made in the foregoing certificate of Change of Registered Office and Registered Agent, and agree to act in such 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 the Registered Agent of PARKINSON OUTREACH PROGRAM - FLORIDA, INC.

LEONARD K. SAMUELS

96 OCT 25 PH 12: 46
SECRETARY OF STATE
TALL AHASSEE STORIE