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July 15, 1996

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

500000133-06-41-126
-07/17/96--01040--014
***122.50 ***122.50

Re: COMPREHENSIVE PAIN CARE OF FLORIDA, P.A.

Enclosed are the original and one copy of the articles of incorporation for the above-named proposed Florida corporation. Also enclosed is a check in the amount of \$122.50, representing the fees for filing and a certified copy.

Please return a certified copy of the enclosed articles of incorporation to the address shown above. In addition, to facilitate matters I have enclosed a self-addressed stamped envelope.

Thank you for your assistance in this matter.

Sincerely,



CARLOS M. LASTRA

CML/em
Enc.

-Chk. #0263

FILED
96 JUL 17 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/18/96
JD

7-01-1996 10:22PM

FROM LILIANA E RODRIGUEZ 305 819 5005

P. 1

CALMS 507-1491



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 14, 1996

LANCE LEHMANN, M.D.
15449 N.W. 83RD CT.
MIAMI, FL 33016

FILED
JUL 17 96 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name COMPREHENSIVE PAIN CARE OF FLORIDA, P.A. has been reserved for 120 days beginning June 14, 1996. The reservation number is R96000002936 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lanham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section

Trevor Brumbley

Letter number: 396A00029631

ARTICLES OF INCORPORATION
OF
COMPREHENSIVE PAIN CARE OF FLORIDA, P.A.

FILED
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TALLAHASSEE, FLORIDA

ARTICLE I. CORPORATE NAME.

The name of this corporation is Comprehensive Pain Care of Florida, P.A.

ARTICLE II. BUSINESS PURPOSE

The purpose of this corporation shall be:

1. To engage in every aspect of the practice of Medicine, and all its fields of specializations, as are engaged in by licensed physicians.
2. To engage and render the professional services involved only through its officers, agents and employees who shall be licensed physicians in good standing and duly licensed or otherwise legally authorized within the State of Florida to render the same professional service as this corporation.
3. To invest its funds in real estate, mortgages, stocks, bonds, or any other type of investments, or own real estate or personal property necessary for the rendering of professional services.
4. To engage in no other business other than the rendition of the professional services specified herein.
5. To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.

ARTICLE III. PRINCIPAL OFFICE.

The principal place of business and mailing address of this corporation is 501 Glades Road, Boca Raton, Florida 33432.

ARTICLE IV. CAPITAL STOCK.

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares.

ARTICLE V. INITIAL REGISTERED AGENT AND OFFICE.

The name and address of the initial registered agent are Lance Lehmann, M.D., 501 Glades Road, Boca Raton, Florida 33432.

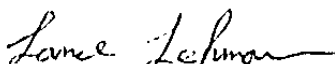
ARTICLE VI. INCORPORATORS.

The name and street address of the incorporator to these articles of incorporation is Lance Lehmann, M.D., 501 Glades Road, Boca Raton, Florida 33432.

ARTICLE VII. BY-LAW AMENDMENT.

The power to adopt, alter, amend or repeal the bylaws of this Corporation shall be vested in the Board of Directors and Stockholders provided that such amendment be in compliance with the laws of the State of Florida.

The undersigned has executed these articles of incorporation on July 12, 1996.



Lance Lehmann, M.D.
Incorporator/Director

STATE OF FLORIDA)
 ss:
COUNTY OF DADE)

I HEREBY CERTIFY that on this 12 of July, 1996, personally appeared before me, an authorized officer duly commissioned to administer oaths and take acknowledgments, Lance Lehmann, M.D., who is personally known to me, or who has produced Florida Drivers' License No. _____, who executed the foregoing Articles of Incorporation and who acknowledged that it was signed and executed for the uses and purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at
Miami, Dade County, Florida, this 12 of July, 1996.



NOTARY PUBLIC, State of Florida

My Commission Expires:



CARLOS M. LASTRA
My Commission CC341074
Expires Jan. 10, 1998
Bonded by HAI
800-422-1865

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICIAL

Pursuant to the provisions of F.S. 607.0501, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the corporation is Comprehensive Pain Care of Florida, P.A.
2. The name of the registered agent is Lance Lehmann, M.D.
3. The address of the registered agent/registered office is 501 Glades Road, Boca Raton, Florida 33432.

Signature: _____

Lance Lehm
President

Date: July 12, 1996

Acceptance:

Having been named as registered agent and designated to accept service of process for the above 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 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.

Lance Lehmann
By: Lance Lehmann, M.D.

Date: July 12, 1996

FILED
JUL 17 1996
CLERK OF COURT
JUL 17 1996