

996000101197

TRANSMITTAL LETTER

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

300002029103--2
-12/13/96-01082--013
****131.25 ****131.25

SUBJECT: NEUROSCIENCE CONSULTANTS INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$78.75 \$122.50 \$131.25
Filing Fee Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate

FROM: PAUL ELLIOTT
Name (printed or typed)

2848 S.E. Federal Highway

Address

Stuart, Florida 34994

City, State & Zip

561-288-6300

Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 13 PM 1:22

Paul Elliott SAW
AUTHORIZATION BY PHONE TO
CORRECT *Cap Name change*
DATE *12/16/96*
DOC. EXAM. *CF*

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

CF 12/16/96

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NEUROSCIENCE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2848 S.E. Federal Highway
Stuart, Florida 34994

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Paul Elliott
2848 S.E. Federal Highway
Stuart, Florida 34994

ARTICLE V. INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Paul Elliott
2848 S.E. Federal Highway
Stuart, Florida 34994

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6th day of December, 1996.



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, 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: NEUROSCIENCE INC.

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

Paul Elliott

(Name)

2848 S.E. Federal Highway

(P.O. Box not acceptable)

Stuart, Florida 34994

(City/State/Zip)

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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.

Paul Elliott
(Signature)

December 6, 1996

(Date)