

P910000412869

Requestor's Name

Kenneth D. Rogers, CPA, PA
333 N. Ferncreek Avenue
Orlando FL 32803

#

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. The Pain Institute, Inc
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

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☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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*****70.00 *****70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY 12 PM 2:26

(H)

Examiner's Initials

5/14

ARTICLES OF INCORPORATION
OF
THE PAIN INSTITUTE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY 12 PM 2:26

ARTICLE I - NAME

The name of this Corporation is THE PAIN INSTITUTE, INC.

ARTICLE II - DURATION

The Corporation shall have a perpetual existence.

ARTICLE III - PURPOSE

The purpose of this Corporation is to engage in any activities or business permitted under the Laws of The United States and Florida.

ARTICLE IV - CAPITAL STOCK

The maximum number of shares which this Corporation is authorized to have outstanding at any time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE V - INITIAL REGISTERED
OFFICE AND AGENT

The initial registered office and mailing address of this Corporation shall be 978 Douglas Avenue, Bldg. 102, Altamonte Springs, Florida 32714, the initial registered agent of this Corporation at such office shall be DR. ROBERT GIBSON, and the principal office, and mailing address of this Corporation shall be 978 Douglas Avenue, Bldg. 102, Altamonte Springs, FL 32714, who upon accepting this designation agrees to comply with the provisions of Section 48.091, Florida Status as amended from time to time, with respect to keeping an office open for service of process.

ARTICLE VI - INITIAL BOARD OF DIRECTORS

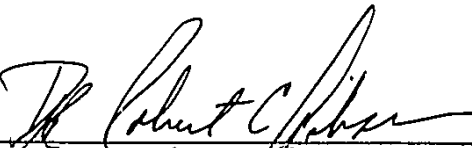
The initial Board of Directors shall consist of one (1) member. The number of directors may be increased or decreased from time to time by vote of the stockholders, but in no case shall the number of directors be less than one (1). The name and address of the director constituting the initial Board of Director is:

<u>Name</u>	<u>Address</u>
Dr. Robert Gibson	2820 Jacana Ct. Longwood, FL 32779

ARTICLE VII - INCORPORATOR

The name and street address of the person signing these Articles of Incorporation is :

<u>Name</u>	<u>Address</u>
Dr. Robert Gibson	2820 Jacana Ct. Longwood, FL 32779



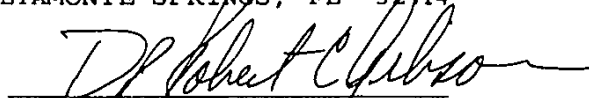
Dr. Robert Gibson
Incorporator

ARTICLE VIII - ACCEPTANCE OF THE
REGISTERED AGENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY 12 PM 2:26

I hereby am familiar with and accept the duties and responsibilities registered agent for THE PAIN INSTITUTE, INC.

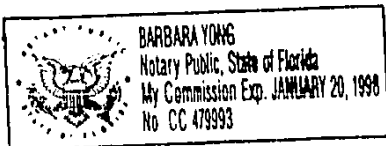
DR. ROBERT GIBSON
978 DOUGLAS AVENUE
BLDG. 102
ALTAMONTE SPRINGS, FL 32714



DR. ROBERT GIBSON

STATE OF FLORIDA }
COUNTY OF ORANGE }

The foregoing instrument was acknowledged before me this 06 day of MAY, 1997, by DR. ROBERT GIBSON Incorporator, of THE PAIN INSTITUTE, INC. a Florida Corporation, on behalf of the corporation. He has produced the following identification:

6125-763-49-179-0 and did/did not take an oath.




(Signature of Person, Taking Acknowledgement)

BARBARA YONG
(Name of Acknowledger Typed, Printed or Stamped)

(Title of Rank)

(Serial Number, if Any)