

NY 9/17/97

**ARTICLES OF INCORPORATION  
OF  
PAIN MANAGEMENT CENTER OF AMERICA, INC.**

**FILED**  
**97 SEP 16 AM 9:34**  
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. CORPORATE NAME**

The Name of the corporation shall be:

**PAIN MANAGEMENT CENTER OF AMERICA, INC.**

The address of the principal office of this corporation shall be 39 Northwest 166th Street, Suite 5, Miami, Florida 33169, 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, 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 100 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

**412 Southeast 18th Street, Fort Lauderdale, Florida 33316,**

and the name of the initial registered agent of the corporation at that address is

**Steven R. Ballinger, Esq.**

## ARTICLE V. OFFICERS AND DIRECTORS

**This Corporation shall have the following officers and directors who shall hold office for the first year of the corporation, or until successors are elected or appointed:**

**James Milne, D.O. - President**

**Anthony Manarino, Ph.D. - Vice President**

**Andrea Manarino - Secretary**

**Carol Scarbrough - Treasurer**

**ARTICLE VI. TERM OF EXISTENCE**


**The existence of this corporation shall be perpetual.**

## ARTICLE VI. INCORPORATOR

**The name and street address of the incorporator to these articles of incorporation:**

**STEVEN R. BALLINGER, P.A.**  
**412 Southeast 18th Street**  
**Fort Lauderdale, Florida 33316**

IN WITNESS WHEREOF, the undersigned incorporator has executed these  
Articles on September 16, 1997.

  
Steven R. Ballinger, Attorney

## DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

Pursuant to the provisions of FS 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 **Pain Management Center of America, Inc.**
2. The name of the registered agent is **Steven R. Ballinger.**
3. The address of the registered agent is:

**STEVEN R. BALLINGER, P.A.  
412 SOUTHEAST 18TH STREET  
FORT LAUDERDALE, FLORIDA 33316**

## ACCEPTANCE

Having been named as register 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.

Dated: September 16, 1997

  
STEVEN R. BALLINGER, Esquire

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