

9/31/98

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: ACE INDUSTRIES, INC.

ACCT#: 070744001530

CONTACT: PAM FRIEDMAN

PHONE: (305)358-2571

FAX #: (305)358-7832

NAME: SOUTH BROWARD NEUROLOGICAL ASSOCIATES, INC.

AUDIT NUMBER.....H98000016359

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLES OF INCORPORATION
of
SOUTH BROWARD NEUROLOGICAL ASSOCIATES, INC.

I, the undersigned incorporator of this corporation, under Florida Statute 607, as amended, adopt the following Articles of Incorporation.

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TALLAHASSEE FLORIDA

ARTICLE I. NAME

The name of the corporation is: **SOUTH BROWARD NEUROLOGICAL ASSOCIATES, INC.** The principal place of business and the mailing address of this corporation shall be 3651 Turtle Run Blvd., Coral Springs, Fl. 33067.

ARTICLE II. NATURE OF BUSINESS

The general nature of the business to be transacted by this corporation is to engage in any lawful activity for which corporations may be organized under the laws of the State of Florida.

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. CAPITALIZATION

The minimum amount of capital with which the corporation will commence is Five Hundred Dollars (\$500.00).

ARTICLE V. VOTING

Except as otherwise provided by law, the entire voting power for all purposes shall be vested exclusively in the holders of the outstanding common shares.

Prepared by
acei Industries, Inc.
54 Northwest 11th St.
Miami, FL 33136
(305) 358-2571

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ARTICLE VI. DURATION

This corporation is to have perpetual existence commencing on the date of execution and acknowledgment of these Articles of Incorporation.

ARTICLE VII. DIRECTORS

The number of directors of the corporation shall be at least one and no more than ten, as voted upon by the shareholders of the corporation.

The names and addresses of the members of the first board of directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and Corporation laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until their successors are elected and have qualified, are:

NAME**ADDRESS**

DAVID ROBBINS 3651 Turtle Run Blvd., Coral Springs, Fl. 33067.

ARTICLE VIII. OFFICERS

The name and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

DAVID ROBBINS
President

3651 Turtle Run Blvd., Coral Springs, Fl. 33067.

ARTICLE IX. PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE X. TRANSFER OF SHARES

No shareholder may transfer or otherwise dispose of his interest in the corporation without first permitting the remaining shareholders a right of first refusal commensurate with their respective proportional shareholder interest in the corporation. Should any shareholder desire not to exercise the right of first refusal, any remaining shareholder shall be entitled to a

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right of second refusal to the first shareholder's exercisable interest of right of first refusal.
Value of the stock shall be determined by a disinterested appraiser.

ARTICLE XI. INITIAL REGISTERED AGENT/OFFICE

The name and address of the initial registered agent of this corporation is: DAVID ROBBINS, 3651 Turtle Run Blvd., Coral Springs, Fl. 33067.

ARTICLE XII. SUBSCRIBER

The name and address of the subscriber of these Articles of Incorporation is: DAVID ROBBINS, 3651 Turtle Run Blvd., Coral Springs, Fl. 33067.

ARTICLE XIII. INDEMNIFICATION

The subscriber, along with the officer and directors of the corporation shall be indemnified and held harmless by the corporation from and against any and all claims, losses, costs, liability or expense incurred by him or her in connection with or resulting from any claim, action, suit or proceeding, in which he or she may become involved, as a party or otherwise, by reason of his or her being or having been a director, officer or employee of the corporation, whether or not he or she continues to be such at the time such loss, costs, liability or expense is imposed or incurred, except with regard to matters as to which any such director, officer or employee is found guilty of gross negligence or willful misconduct in the performance of his or her duty.

Expenses (including attorney's fees) incurred in defending any claim, action, suit or proceeding may be paid by the corporation in advance of the final disposition of such proceeding.

Dated this 1st day of September, 1998



DAVID ROBBINS, PRESIDENT

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STATE OF FLORIDA

COUNTY OF DADE

)
) ss:
)

BEFORE ME, the undersigned Notary Public, personally appeared DAVID KATHARIS, who produced _____ as identification and/or is well known to be the person described in and who executed the foregoing Articles of Incorporation, as President of, and, upon oath, acknowledged before me, that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal, at _____, DADE County, Florida, this 1 day of September, 1998

Wendy Rogers
Notary Public

My Commission Expires:



WENDY ROGERS
COMMISSION # CC 660988
EXPIRES JUL 1, 2001
BONDED THRU
ATLANTIC BONDING CO., INC.

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM,
PROCESS MAY BE SERVED**

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE
FOLLOWING SUBMITTED:


FIRST --**SOUTH BROWARD NEUROLOGICAL ASSOCIATES,
INC.** DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS LOCATED AT DAVID
ROBBINS, 3651 Turtle Run Blvd., Coral Springs, Fl. 33067, HEREBY NAMES DAVID
ROBBINS, 3651 Turtle Run Blvd., Coral Springs, Fl. 33067, AS REGISTERED AGENT FOR
SOUTH BROWARD NEUROLOGICAL ASSOCIATES, INC.



DAVID ROBBINS

SOUTH BROWARD NEUROLOGICAL ASSOCIATES, INC.

HAVING BEEN NAMED TO ACCEPT SERVICE OR PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND
COMPLETE PERFORMANCE OF MY DUTIES.



DAVID ROBBINS
REGISTERED AGENT
DATED: 9/1/98

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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