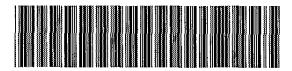
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PICK-UP	WAIT MAIL
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OFFICE USE ONLY(DOCUMENT #)	
LAZARUS CORPORATE FILIN	NG SERVICE
3320 S.W. 87 AVENUE	
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1. CHINO DIAG (Corporation Name)	OCUMENT NUMBER(S) (if known):  NOSTICS CENTER TWC.  (Document #)
2. (Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
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NonProfit	Resignation of R.A., Officer/Director
. Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILNGS	REGISTRATION
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation —	Limited Partnership
<u> </u>	Reinstatement
	Trademark

Other

Examiner's Initials

CR215031(9/92)

#### ARTICLES OF INCORPORATION

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:

Chino Diagnostics Center inc

03 FEB 10 PH 3: 36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

# ARTICLE II - PRINCIPAL OFFICE

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

1801 CORAL WAY MIA FL 33145 S#104

#### ARTICLE III -SHARES

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

100

## ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nidio PEREZ 1801 CORAL WAY Mia FI 33145 5# 104

## ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:  Nilio Villez
1801 CORAL WAY MIX EL 3145
The undersigned incorporator has executed these Articles of Incorporation this _Z_ day of Frank 20
Signature

# ARTICLE VI- DIRECTOR(S)

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature