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Florida Department of State
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FLORIDA PROFIT CORPORATION OR P.A.

LAB DELIVERY SYSTEMS, INC.

Certificate of Status	0
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TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION
OF
LAB DELIVERY SYSTEMS, INC.

ARTICLE I.
NAME

The name of this corporation is LAB DELIVERY SYSTEMS, INC.

ARTICLE II.
NATURE OF BUSINESS

LAB DELIVERY SYSTEMS, INC., is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III.
TERM OF EXISTENCE

The duration of LAB DELIVERY SYSTEMS, INC., is perpetual.

ARTICLE IV.
CAPITAL STOCK

LAB DELIVERY SYSTEMS, INC., is authorized to issue 100 shares of common stock, par value \$1.00 per share.

ARTICLE V.
ADDRESS

The principle address of LAB DELIVERY SYSTEMS, INC. is:

85 Grand Canal Drive
Suite 202
Miami, FL 33144

and the name of the initial registered agent of this corporation at this address is:

Jason Mendoza

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ARTICLE VI
INITIAL DIRECTORS

Jason Mendoza
85 Grand Canal Drive
Suite 202
Miami, FL 33144

LAB DELIVERY SYSTEMS, INC., shall have one (1) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial director:

Jason Mendoza
85 Grand Canal Drive
Suite 202
Miami, FL 33144

ARTICLE VII
OFFICERS

The Name and address of the initial officer is:

Jason Mendoza
President/Secretary/Treasurer/Director

ARTICLE VIII
INCORPORATOR

The name and addresses of the incorporator of this corporation is:

Jason Mendoza
85 Grand Canal Drive
Suite 202
Miami, FL 33144


Jason Mendoza

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ACCEPTANCE OF APPOINTMENT

OF

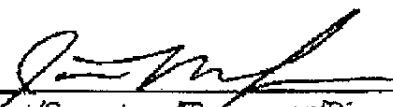
REGISTERED AGENT

Pursuant to the provisions of section 607.0501, 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.

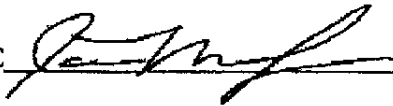
1. The name of the corporation is: LAB DELIVERY SYSTEMS, INC.

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

Jason Mendoza
85 Grand Canal Dive
Suite 202
Miami, FL 33144

SIGNATURE 
TITLE President/Secretary/Treasurer/Director
DATE July 14, 2003

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 THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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.

SIGNATURE 
DATE July 14th, 2003