

PO4000169879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

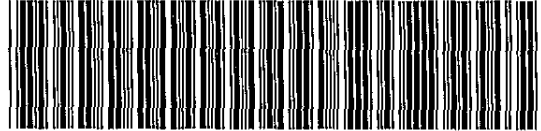
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

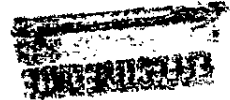
Special Instructions to Filing Officer:

Office Use Only

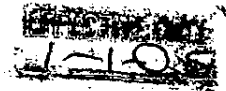


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FILED
2004 DEC 20 P 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



ARTICLES OF INCORPORATION

In compliance with Chapter 07 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TRINITY DIAGNOSTIC IMAGING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

228 NORTH C Street suite 1A
LAKE WORTH FL 33460

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO HELP THE COMMUNITY TO STAY HEALTHY

ARTICLE IV SHARES

The number of shares of stock is:

Sole Proprietor(1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ABDOU HARC-Eugene President
232 North C Street
LAKE WORTH FL 33460

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

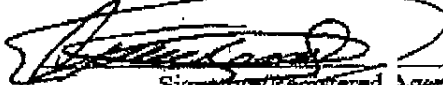
ABDOU HARC-Eugene
232 North C Street LAKE WORTH FL 33460

ARTICLE VII INCORPORATOR

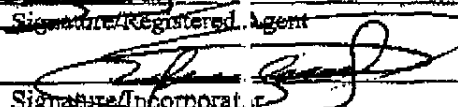
The name and address of the incorporator is:

ABDOU HARC-Eugene
232 North C Street LAKE WORTH FL 33460

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

02/22/06

Date

02/22/06

Date

Effective 1-1-05

1-1-05

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