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TALLAHASSEE FLORIDA

To:

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Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
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FLORIDA PROFIT/NON PROFIT CORPORATION
COMPLETE HEALTH DIAGNOSTIC & NUCLEAR SOLUTIONS INC

Certificate of Status	0
Certified Copy	1
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September 7, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BERRIZ & GIRALDO P.A.

SUBJECT: FLORIDA SUPPLY CORP.
REF: W06000039361

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I- NAME

The name of this CORPORATION is

COMPLETE HEALTH DIAGNOSTIC & NUCLEAR SOLUTIONS INC

ARTICLE II- PRINCIPAL OFFICE

The principal place of business/mailling address is:

**3970 W. FLAGLER ST., SUITE 101
CORAL GABLES, FL, 33134-1462**

ARTICLE III - PURPOSE

The purpose of this Corporation is to engage in any and all business activities that are related to

MEDICAL DIAGNOSTIC PROCEDURE

ARTICLE IV- SHARES

The number of shares of stock is : 100

ARTICLE V - INITIAL OFFICERS AND/ OR DIRECTORS

This Corporation shall have four (1) director initially. The number of directors may be increased or diminished from time to time by the By-Laws but shall never be less than one (1).

The name and address of the Directors of this Corporation is:

GERARDO PORTILLA

6366 SW 15 ST. , MIAMI, FL, 33144

ARTICLE VI- INITIAL REGISTERED OFFICE AND AGENT

The name and address of the initial registered agent of this Corporation is

GERARDO PORTILLA

6366 SW 15 ST., MIAMI, FL, 33144

ARTICLE VII- INCORPORATOR

The name and address of the incorporator is


**GERARDO PORTILLA
6365 SW 15 ST., MIAMI, FL, 33144**

ARTICLE VIII- EFFECTIVE DATE

The effective day of formation for the Corporation is

SEPTEMBER 06, 2006

IN WITNESS WHEREOF, the undersigned incorporator /subscriber has executed this Articles of Incorporation, this *06 day of September, 2006*




Signature of Incorporator

STATE OF FLORIDA
COUNTY OF DADE

BEFORE ME, this date, personally appeared Jose Guillermo Martinez, known to me to be the individual described herein who executed the foregoing Articles of Incorporation and he acknowledged before me that he executed these Articles of Incorporation.

GIVEN under my hand and official seal this *09* day of *Sept, 2006*.



NOTARY PUBLIC

 Miriam C. Sifontes
Commission #DD230678
Expires: Jul 09, 2007
Bonded Thru
Atlantic Bonding Co., Inc.

SEAL

FILED

SEP - 7 AM 10: 00

CERTIFICATE OF DESIGNATION REGISTER AGENT/ REGISTER OFFICE

Pursuant to the provisions of Section 607.325 F.S., 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.

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

NAME

The name of the Corporation is :

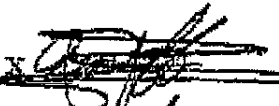
COMPLETE HEALTH DIAGNOSTIC & NUCLEAR SOLUTIONS INC

NAME/ADDRESS REGISTER AGENT/ OFFICE

The Name of Agent is: **GERARDO PORTILLA**
The Address of the Agent is: **6366 SW 15 ST. , MIAMI, FL, 33144**

Name: GERARDO PORTILLA

Title: Director

Signature: X 

Date: 09/06/06

REGISTER AGENT

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.

X 
Signature

09/06/06
Date