

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

P990000 71724

600002957676---0
-08/12/99--01014--003
*****78.75 *****78.75

SUBJECT: MARLIN Diagnostics INC.
(Proposed corporate name - must include suffix)

6

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 AUG 11 AM 9:55

FILED

FROM:

CLAUDIA MARLIN

Name (printed or typed)

5616 POLK ST.

Address

HOLLYWOOD FL 33021

City, State & Zip

(954) 817-6771

Daytime Telephone number

W99-16440-8/12/99
RV
[Signature]

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 11, 1999

DAVID G. CHERISOL
C/O P. R. P. AUTO FINANCE, INC.
13601 N.W. 2ND AVE.
MIAMI, FL 33168

SUBJECT: P. R. P. AUTO FINANCE, INC.
Ref. Number: P99000041405

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

WE DID RECEIVE YOUR REQUEST AND CHECK FOR \$8.75, BUT THE 2ND PAGE OF THE ARTICLES IS MISSING AND WE MUST HAVE THAT PAGE BEFORE WE CAN PROCESS YOUR REQUEST.

PLEASE CALL ME TO GET THIS TAKEN CARE OF.

If you have any further questions concerning your document, please call (850) 487-6922.

Bobbie Cox
Senior Corporate Section Administrator

Letter Number: 299A00040611

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:

MARLIN Diagnostics INC.

ARTICLE II PRINCIPAL OFFICE

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

*5616 POLK ST.
Hollywood, FL. 33021*

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*CLAUDIA MARLIN
5616 POLK ST.
Hollywood, FL. 33021*

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

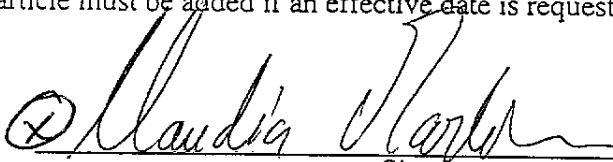
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CLAUDIA MARLIN
5616 POLK ST
HOLLYWOOD, FL. 33021

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

21 day of MAY, 19 99.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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:

MARLIN DIAGNOSTICS INC.

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

CLAUDIA MARLIN
(NAME)

5616 POLK ST
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

HOLLYWOOD, FL 33021
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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 this capacity. I further agree to comply with the provisions 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.

(X) Claudia Marlin
(SIGNATURE)

5/21/99
(DATE)