# POOCOS TRANSMITTAL LETTER 956

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

ed is an original and one(1) copy of the articles of incorporation and a check for:  \$70.00 \$\sim \frac{\sigma}{\sigma} \sigma \sigma \sigma \frac{\sigma}{\sigma} \sigma \sigma \frac{\sigma}{\sigma} \sigma \frac{\sigma}{\sigma} \sigma \frac{\sigma}{\sigma} \sigma \sig	ed is an original and one(1) copy of the articles of incorporation and a check for:  S70.00 S78.75 S78.75 S1 S87.50 Filing Fee Filing Fee & Certificate of Status  Certificate of Status  ADDITIONAL COPY REQUIRED  FROM:  Jo Ann Camasso  Name (Printed or typed)  3710 N.E. 15th Terrace  Address	ECT: Phy	siological Labs &	Services Inc.	The state of the s	1.0
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status  Certificate of Status  ADDITIONAL COPY REQUIRED  FROM:  Name (Printed or typed)  \$78.75 S87.50 Filing Fee Filing Fee, & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status  Filing Fee & Certificate of Status  ADDITIONAL COPY REQUIRED  FROM:    Name (Printed or typed)   3710 N.E. 15th Terrace   3710 Address   3710 N.E. 15th Terrace   3710 N.E. 15th Terrace				UDE SUFFIX)	_
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status  Certificate of Status  FROM:  S78.75 Filing Fee Filing Fee Filing Fee, & Certified Copy & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED  Name (Printed or typed)	From:  S70.00  \$78.75  Filing Fee  & Certificate of Status  S78.75  Filing Fee  & Certified Copy  & Certificate of Status  ADDITIONAL COPY REQUIRED  The same (Printed or typed)  3710 N.E. 15th Terrace  Address  Pompane Reach Floreing Fee  Address  Pompane Reach Floreing Fee  Address  Pompane Reach Floreing Fee  Filing Fee  Address  Address  From:  S87.50  Filing Fee  Filing Fee  Filing Fee  Address  Filing Fee  Filing Fee  Address  Filing Fee  Filing Fee  Address  Filing Fee  Filing Fee  Address	d is an origina	al and one(1) copy of the article	es of incorporation and a	check for	
Name (Printed or typed)	Name (Printed or typed)  3710 N.E. 15th Terrace  Address	<b>□</b> \$70.00	₩ \$78.75 Filing Fee	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
	Address Edward Room Room Room Room Room Room Room Roo	FROM:	Name (Pr	inted or typed)		
City, State & Zip			954-941-9609			

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

Daytime Telephone number

G10/9/00

#### ARTICLES OF INCORPORATION

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

FILED CICRETARY OF STATE CIVISION OF CORPORATIONS

00 OCT -5 AN 9: 46

# ARTICLE I NAME

The name of the corporation shall be:

Physiological Labs & Services Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3710 N. E. 15th Terrace Pompano Beach, Florida 33064

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in medical diagnostic testing of any kind and description and the doing of any other business and services incidental to or connected with such work

#### ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Joyce Gustafson (President)

Paul Kekarainen (Treasurer)

Jo Ann Camasso (Secretary)

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Jo Ann Camasso

3710 N.E. 15th Terrace

Pompano Beach, Florida 33064

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joyce Gustafson

914 S. Monterey Circle

Boynton Beach, Florida 33436

Signature/Registered Agent

Date

10/03/00

Date

10/03/00

Date