20010989 TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

400003476454-

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 of Status

\$78.75

☐ S87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status.

ADDITIONAL COPY REQUIRED

MIKE R. MARCECC Name (Printed or typed)

් වරයි 607-6141 Daytime Telephone number

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be:	OO NO SECNI	
Clear Scan Diggnostics Inc.	27 NSSE	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1100 OAEBRIDGE PREUP #141 CAKELAND, FL 33803	MI 4: 33	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	•	,
APTICLEN and MRI digenestic proce	edures	
ARTICLE IV SHARES The number of shares of stock is: /00		
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):		
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:		
MIRE R. MARGER		
1100 OAKBRINGE AKOUN HE		
LAKELAND, FL 88803		
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:	•	
MIKE A. MARCES		
1100 0000000000000000000000000000000000		
LAKECAND, FL 33803	•	٠,

Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familia with and accept the appointment as registered agent and agree to act in the		*** this
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Signature/Registered Agent	11-8-00	
Da	te	
Signature/Incorporator Da	16-8-00 :	: