

TRANSMITTAL LETTER

**PO/0000012409**

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

100003623281--6  
-02/01/01--01090--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Oximetry Stat, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: SAM JARZYNSKI  
Name (Printed or typed)

3350 Ulmeaton Rd #3  
Address

Clearwater FL 33762  
City, State & Zip

727-572-7595  
Daytime Telephone number

FILED  
01 FEB - 1 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

T. Burch FEB 2 2001

# 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: Oximetry Stat, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3350 Ulmerton Rd Suite 3  
Clearwater FL. 33762

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Testing Services, Healthcare.

## ARTICLE IV SHARES

The number of shares of stock is: 1000

## 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:

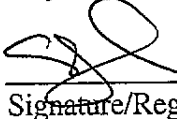
SAM JARCZYNSKI  
112 Masters Lane  
Safety Harbor FL 34695

## ARTICLE VII INCORPORATOR

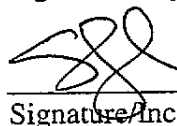
The name and address of the Incorporator is:

SAM JARCZYNSKI  
- Above - 112 Masters Lane  
Safety Harbor FL 34695

\*\*\*\*\*  
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

 / Sam JARCZYNSKI  
Signature/Registered Agent

1/29/01  
Date

 / Sam JARCZYNSKI  
Signature/Incorporator

1/29/01  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA