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LAZ <u>ARÚS CORPORATE FILING SE</u> RVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Aldress) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #)	100047952816 -01/25/0201001017 - ******78.75 ******78.75
TERESA ROMAN (TALLAHASSEE REPRESENTATIV	E) OFFICE USE ONLY
CORPORATION NAME(S) & DOCUMENT NO. 1. B & J DIAG-RESP, (Corporation Name)	
4. (Corporation Name)	(Document #)
Walk in Pick up time 3.00 Mail out Will wait Photocopy	(Document #) (D
Profit Amendment NonProfit Resignation	of R.A., Officer/Director egistered Agent Vithdrawal ATION ATION Inership

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:

B & J Diag-Resp. INC.



ARTICLE II - PRINCIPAL OFFICE

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

7511 NW 73rd Street
Miami, FL 33166
Siut # 112

ARTICLE III -SHARES

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

500

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Justina Salinas. 3889 SW 142 AVE. Miami, FL 33175

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Justina Salinas 3889 SW 142 AVE. Miami, FL 33175

Signature

ARTICLE VI- DIRECTOR(S)

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

JUstina Salinas (P) 3889 SW 142 AVE. Miami, FL 33175

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature