

TRANSMITTAL LETTER

P02000042884

Department of State
Division of Corporations
P. O. Box 3200
Tallahassee, FL 32314

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900005196529--2
-04/08/02--01004--023
*****75.00 *****75.00

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

ADDITIONAL COPY REQUIRED

FROM: _____

JENNIFER VASQUEZ
2581 Jupiter Park Dr.
#4
Jupiter, FL 33458

Daytime Telephone number

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

Suffix
02 APR 19 AM 9:20
FILED
TALLAHASSEE FLORIDA
SECRETARY OF STATE

4/22

0505
2551



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 8, 2002

JENNIFER VASQUEZ
2581 JUPITER PARK DR.
#F4
JUPITER, FL 33458

SUBJECT: DIGICAL MEDICAL SYSTEMS
Ref. Number: W02000009702

We have received your document for DIGICAL MEDICAL SYSTEMS. However, the document has not been filed and is being returned for the following:

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 602A00020618

ARTICLES OF INCORPORATION
OF
Digical Medical Systems, Inc.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

FILED
02 APR 19 AM 9:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be Digical Medical Systems, Inc.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV ADDRESS

The street address of the initial registered office of the corporation shall be 2581 Jupiter Park Drive, Suite F4, Jupiter, Florida, 33458, Phone: (561)745-4403 and the name of the initial Registered Agent for the corporation at that address is Anabelle Lopez

ARTICLE V SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish this compliance.

ARTICLE VI TERM OF EXISTENCE

This corporation shall exist perpetually.

ARTICLE VII LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought

FORM3001

against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

ARTICLE VIII SELF DEALING

No contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any other corporation, and any director or directors, individually or jointly, may be a party or parties to, or may be interested in such contract, act or transaction, or in any way connected with such person or person's firm or corporation, and each and every person who may become a director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of himself or any firm, association or corporation in which he may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that he is also a director of such subsidiary or corporation.

This corporation shall have a minimum of one director. The initial Board of Directors shall consist of:

Jennifer Vazquez _____

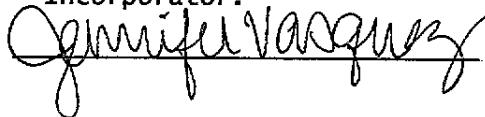
ARTICLE IX INCORPORATOR

The name and address of the incorporator is:

Jennifer Vazquez
2581 Jupiter Park Drive Suite F4
Jupiter, Florida 33458

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal on this 28 day of March, 2002.

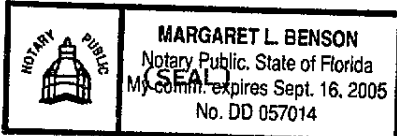
Incorporator:



STATE OF Florida
COUNTY OF Palm Beach

FORM3001

The foregoing instrument was executed and acknowledged
before me this 28th day of March, 19 2003, by
Jennifer M. Vasquez



Margaret L. Benson
Notary Public
State of Florida
My Commission Expires:
Sept. 16, 2005

DESIGNATION OF AND ACCEPTANCE
BY REGISTERED AGENT

The following is submitted in compliance with the laws of
the State of Florida. Digical Medical Systems,
a corporation organizing under the laws of the State of Florida,
with its principal office located at 2581 Jupiter Park Drive Suite F4,
Jupiter, Florida 33458, has named
Anabelle Lopez, whose address is
2581 Jupiter Park Drive Suite F4, Florida 33458,
as its Agent to accept service of process
within this State.

ACCEPTANCE:

I agree as Registered Agent to accept service of process;
to keep the office open during prescribed hours; to post my name
(and any other officers of said corporation authorized to accept
service of process at the above designated address) in some
conspicuous place in the office as required by law.

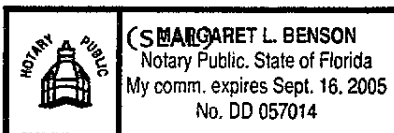
Registered Agent:

Anabelle Lopez

STATE OF Florida
COUNTY OF Palmetto

BEFORE ME, the undersigned authority, this day personally
appeared Anabelle Lopez, who, after
being duly sworn, deposes and says that the facts and matters
contained above are true and correct, and that he has executed
the same for the purposes expressed herein.

WITNESS my hand and official seal this 28th day of
March, 19 2003



Margaret L. Benson
Notary Public
State of Florida
My Commission Expires:
Sept. 16, 2005

FILED
02 APR 9 AM 9:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA