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OFFICE USE ONLY (Document #) EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) 1000 PONCE DE LEON BLVD. STE: 101 (Address) CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) (Phone #) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time Certificate of Status Mail out Will wait Photocopy **AMENDMENTS** NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement JUN 5 Trademark

Other

CR2E031(9/92)

F. OHESSER

Examiner's Initials

ARTICLES OF INCORPORATION FOR

Adri Dragnostic Center, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME
The name of the corporation shall be:
Adri Diagnostic Center, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

10 Lejeune Rd ≠ 300 A Mlami, FL 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

100

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

Candido Diaz 10 Lejeune Rd # 300A Mlami, Fl 33126 The name and address of the incorporator(s) to these Articles of Incorporation shall be:

Candido Dias

10 Le Jeune (2) # 300 A

Miami, F[33126]

Signature of Incorporator

0402 Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

Candido Diaz (P) 10 Lejeune Rd #300A Miami Fl 33126

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Date

TALLAHASSEE, FLORIDA