

P02000117494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

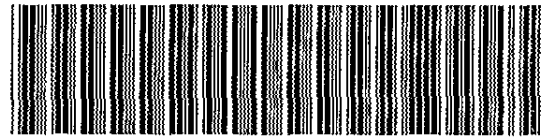
(Business Entity Name)

(Document Number)

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02 NOV -1 M 9:51  
DIVISION OF REGISTRATION

FILED  
2002 NOV -1 PM 12:43  
TALLAHASSEE STATE  
SECRETARY OF REVENUE

8/11/02

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STATE OF FLORIDA  
TALLAHASSEE FLORIDA

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):**

- 1. ARC DIAGNOSTIC SERVICES, INC.  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in  Pick up time  Certified Copy
- Mail out  Will wait  Photocopy  Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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DEPT. OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

ARC DIAGNOSTIC SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

12555 BISCAYNE BLVD.  
N. MIAMI, FL 33181

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

SHARES: 100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

OSCAR ALBERTO ARCE (P)  
12555 BISCAYNE BLVD.  
N. MIAMI, FL 33181

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

OSCAR ALBERTO ARCE  
12555 BISCAYNE BLVD.  
N. MIAMI, FL 33181

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

OSCAR ALBERTO ARCE  
12555 BISCAYNE BLVD.  
N. MIAMI, FL 33181

\*\*\*\*\*

*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*

*Oscar Arce*

Signature/Registered Agent

10-31-02

Date

*Oscar Arce*

Signature/Incorporator

10-31-02

Date