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(((H04000057388 3)))

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 : (305)716-0346 Phone Fax Number

# FLORIDA PROFIT CORPORATION OR P.A.

WESTCHESTER DIAGNOSTIC MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	į
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Electronic Filing Menu.

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Corporate Filing

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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 18, 2004

FAS-T CORP. AGENTS, INC.

SUBJECT: WESTCHESTER DIAGNOSTIC MEDICAL CENTER, INC.

REF: W04000010919

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please look at your remistered agent page, you have your registered agent name and the corporate name in the wrong places.,

If you have any further questions concerning your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section FAX Aud. #: R04000057388 Letter Number: 204A00018110

# CERTIFICATE OF INCORPORATION

OF

WESTCHESTER DIAGNOSTIC MEDICAL CENTER, INC.

TALLAHASSEE, FLORIDA

I (we) the undersigned, do to hereby associate ourselves together and subscribe this Certificate of incorporation for the purpose of forming a corporation under the laws of the State of Florida, and subject to the following provisions:

\*\*\*\*\*ARTICLE ONE\*\*\*\*

The name of the of the corporation shall be: WESTCHESTER DIAGNOSTIC MEDICAL CENTER INC.

\*\*\*\*\*ARTICLE TWO\*\*\*\*\*

The corporation may engage in any activity or business permitted under the laws of the United States of America and of the State of Florida.

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## \*\*\*\*\*ARTICLE THREE\*\*\*

The maximum number of shares of stock, which the corporation shall have outstanding at any time, shall be One Thousand (1000) Shares of Stock, which shall be common stock of a par value per share. All or any part of the capital stock may be paid either in lawful monies of the United States of America, or in services, at true value thereof.

#### \*\*\*\*\*ARTICLE FOUR\*\*\*\*

This corporation shall begin business with a minimum capital of the amount of One Thousand (\$1000.00) Dollars.

### \*\*\*\*\*ARTICLE FIVE\*\*\*\*

This corporation shall have perpetual existence.

## \*\*\*\*\*ARTICLE SIX\*\*\*\*

The principal office of the corporation shall be located at:

#### B04000057388 3

8300 SW 8TH STREET, STE. #301 MIAMI, FL 33144

Other office for the transaction of business may be located wherever the Directors may deem necessary or expedient.

## \*\*\*\*ARTICLE SEVEN\*\*\*\*

The business of the corporation shall be managed by a Board of Directors, who need not be stockholders of the corporation. The number of Directors, not less than one, shall be fixed by resolution of the stockholders at any regular or special meeting, subject to the manner of holding such meetings prescribed by the by-laws.

## \*\*\*\*\*ARTICLE EIGHT\*\*\*\*

The name and post office addresses of the members of the first Board of Directors and the officers who shall hold office for the first year of existence of the corporation or until their successors are elected or appointed and have qualified, are as follows:

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**BOARD OF DIRECTORS:** 

Name:

Address: 8300 SW 8TH STREET, STE. #301

MIAMI, FLORIDA 33144

Name:

ARANELYS LOPEZ

Address: 8300 SW 8TH STREET, STE. #301

MIAMI, FL. 33144

The name and post office addresses of each of the subscribers to this certificate of Incorporation and the number of shares of stock, which each, subscriber agrees to take, are as follows:

SUBSCRIBER: XI

Name:

ARANELYS LOPEZ

Address: 8300 SW 8TH STREET, STE. #301

MIAMI, FL. 33144

Shares:

1000

# \*\*\*\*\*ARTICLE TEN\*\*\*\*

This corporation shall have full power to carry on and transact each of all of the businesses enumerated in Article Two of the Certificate, and shall have all the general and additional powers now and hereafter conferred upon it by law.

### \*\*\*\*\*ARTICLE ELEVEN\*\*\*\*

This corporation shall have the power to issued the whole or any part determined by the Board of Directors, of the shares of the capital stock as partly paid, subject to calls thereon until the whole thereof shall have been paid.

## \*\*\*\*\*ARTICLE TWELVE\*\*\*\*

Upon election of a Board of Directors by the stockholders, such Board of Directors shall manage the business affairs of this corporation without the necessity of further authority from the stockholders, except as by law or in this certificate otherwise provided: any action of such Board of Directors may be rescinded, or any officer or director removed from office, only upon a vote of stockholders holding a majority of the stock of the corporation which may at such time be actually issued unless otherwise provided by the by-lows of the Board of Directors. All holders of common stock of this corporation shall be entitled to vote the same in the manner provided by law whether said stock be fully or partially paid unless otherwise determined by the Board of Directors at or before the time of issuance thereof.

## \*\*\*\*\*ARTICLE THIRTEEN\*\*\*\*\*

The corporation does hereby designate the following address as its registered office: 8300 SW  $8^{TH}$  STREET, STE. #301

MIAMI, FL. 33144

The corporation does hereby designate as its registered agent:

ARANELYS LOPEZ

\*\*\*\*\*ARTICLE FOURTEEN\*\*\*\*\*

THE NAME AND ADDRESS OF THE INCORPORATOR OF THIS

CORPORATION IS:

#### HO4000057388 3

ARANELYS LOPEZ

8300 SW 8<sup>TH</sup> STREET, STE. #301 MIAMI, FL. 33144

STATE OF FLORIDA)

SS.

COUNTY OF DADE)

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared:

**ARANELYS LOPEZ** 

Who, after being by me first duly sworn, executed the foregoing Certificate of Incorporation, freely and voluntarily for the purpose therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Miami, said county and State,)

Notary Public, State of Florida at

My Commission expired:

#### H04000057388 3

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHO PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statements, the following is submitted, in

Compliance with said act: Westchester Diagnostic Hedical Center, Inc 8300 SW 8TH STREET, STE. #301

MIAMI, FL. 33144

Desiring to organize under the Laws of State of Florida with its principal office, as indicated in the Articles of Incorporation At: State of Florida as its agent to accept services of process this state. NAME AS AraneLys Lopez

LOCATED AT: 8300 SW 8TH STREET,

STE. #301, MIAMI, FL. 33144. STATE OF FLORIDA AS ITS AGENT TO ACCEPT SERVICES OF PROCESS THIS STATE.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT) Having been named to accept service of process for the above stated corporation, at place designated in this certificate I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to keeping open said office.

Registered Agent