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TALLAFASSEE, FLORIDA

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June 22, 2004

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Subject:

Goldenberg Pathology, P.A.

Dear Sr. or Madam:

Enclosed please find an original and one (1) copy of the Articles of Incorporation for the subject corporation and a check in the amount of \$87.50, for the filing fee, Certified Copy, and Certificate of Status.

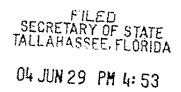
Should you have any questions, please call me at (305) 662-2125.

Sincerely

Carlos J. Goldenberg, M.D.

Pinecrest, Fl 33156

ARTICLES OF INCORPORATION OF



GOLDENBERG PATHOLOGY, P.A.

ARTICLE I NAME

The name of the corporation is:

Goldenberg Pathology, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is:

10745 SW 74 Ct.

Pinecrest, Fl. 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in the performance of medical services as permitted by law and to engage in any other activities or business permitted under the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is 1,000, all of one class, at \$1.00 par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

This corporation shall have one Director initially. The name and address of the initial Director of this corporation is:

Carlos J. Goldenberg, M.D. 10745 SW 74 Ct. Pinecrest, Fl. 33156

ARTICLE VI REGISTERED AGENT

The name and address of the initial registered agent is:

Bertha M. Goldenberg 10745 SW 74 Ct. Pinecrest, FL. 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator signing these Articles of Incorporation is:

Carlos J. Goldenberg, M.D. 10745 SW 74 Ct. Pinecrest, Fl. 33156: SECRETARY OF STATE TALLAHASSEE, FLORID

ARTICLE VIII AMENDMENT OF ARTICLES

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment to these articles, and any right conferred upon the shareholders is subject to this reservation

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

Signature/Registered Agent

Date

Signature/Incorporator/

Date