Florida Department of State

Division of Corporations

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FLORIDA PROFIT CORPORATION OR P.A.

Coastal Teleradiology Inc.

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#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Coastal Teleradiology Inc.

ARTICLE II PRINCIPAL OFFICE

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

Coastal Teleradiology Inc. 407 Islebay Drive Apollo Beach, FL 33572 TOTAL SEP 15 A 9 2

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kim Knights 15227 Merlinglen Place Lithia, FL 33547

Prepared By:
Bruce B. Hubbard
77 East John St.
-licksville, New York 11801
1-516-935-3940

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# ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Gil Narvaez- President 333 Victory Road, Suite 11-25 North Quincy, MA 02171

## ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Gil Narvaez 333 Victory Road, Suite 11-25 North Quincy, MA 02171

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

7th day of September 2004.

Gil Narvaez - Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE POLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Coastal Teleradiology Inc.			
2. The name and address of the registe	red agent and office is:			
	Kim Knights	1320	2004	endind.
	Name		<del>SEP</del>	6234444
	15227 Merlinglen Place	湯美	5	i I
	(P.O. Box or Mail Drop Box NOT Acceptable)	200	$\triangleright$	
	Lithia, FL 33547		م.	
	(City / State / Zip)	를리	27	

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

Kim Knights SIGNATURE September 7, 2004

(Date)