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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.
MEDICAL SONOGRAPHY SPECIALIST, INC.

Certificate of Status	0
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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

of
MEDICAL SONOGRAPHY SPECIALIST, INC.
(Name of Corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I- CORPORATE NAME

The name of the corporation is:

MEDICAL SONOGRAPHY SPECIALIST, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of operating SONOGRAPHY MEDICAL SERVICES.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of one dollar (\$) (1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Agent office and the name of the Initial Registered Agent at that office are:

NAME DANIEL DEL CASTILLO
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

The principal office, if known or the mailing address of the corporation is:

NAME MEDICAL SONOGRAPHY SPECIALIST, INC.
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follow:

NAME DANIEL DEL CASTILLO
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

NAME SARA DUQUE
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

NAME _____
ADDRESS _____
CITY _____

NAME _____
ADDRESS _____
CITY _____

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME DANIEL DEL CASTILLO
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

NAME SARA DUQUE
ADDRESS 12245 OLD COUNTRY ROAD
CITY WELLINGTON, FL. 33414

NAME _____
ADDRESS _____
CITY _____

NAME _____
ADDRESS _____
CITY _____

IN WITNESS WHEREOF, the undersigned and subscriber(s) have executed these Articles of Incorporation this 6TH DAY OF JANUARY 2005.

✓ *Daniel Castillo R* (Seal)

✓ *Sara Duque P.* (Seal)

_____ (Seal)

_____ (Seal)

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
MEDICAL SONOGRAPHY SPECIALIST, INC.
(Name Corporation)

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Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation


At: MEDICAL SONOGRAPHY SPECIALIST, INC.
12245 OLD COUNTRY ROAD
WELLINGTON, FL. 33414

Has named DANIEL DEL CASTILLO

Located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

✓ 

(REGISTERED AGENT)