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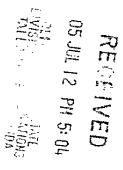
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2. (Corporation Name)	(Document #)	<u> </u>
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NEW FILINGS Prefit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	d Agent
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		Fyaminar's Initials

Examiner's Initials

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:

Clinica L SonogRAM ASSOCIATE, INC.

ARTICLE II - PRINCIPAL OFFICE

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

3018 SW 245+ Migui F/ 33145

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAUDEL CONSE 3018 SW 245+ Miami, F/ 33145

SULL MAN

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: $\mathcal{D}_{\bullet} = \mathcal{D}_{\bullet} = \mathcal{D}_{\bullet}$

3018, SW 24 ST 191941, Fl. 33142

The undersigned incorporator has executed these Articles of Incorporation this $\frac{11}{4}$ day of $\frac{33145}{2005}$

ARTICLE VI- DIRECTOR(S)

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

RAUDEL CONDE PRESIDE LICINIO LANZADA VICEPRE 3018 SW 24St VICEPRE

3018 5W 2431 Hiani Fl. 33145

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.