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Florida Department of State  
Division of Corporations  
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*Baird*

To:

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

From:

Account Name : FAS-I CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 DEC 19 PM 1:09

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**FLORIDA PROFIT CORPORATION OR P.A.**

**T & A DIAGNOSTIC CENTER INC.**

Certificate of Status	0
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*C.S. 12-20*

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**ARTICLES OF INCORPORATION** DEC 19 PM 1:09  
**OF**  
**T & A DIAGNOSTIC CENTER INC.** SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME**

The name of the corporation shall be:

**T & A Diagnostic Center Inc.**

The principal place of business of this corporation shall be:  
**6555 NW 36 ST #103, Miami, Fl 33166**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

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

**100 Shares at \$1.00 Par Value**

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

**(P) Arnaldo A. Chavez 6555 NW 36 St #103, Miami, Fl 33166**

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ARNALDO A. CHAVEZ  
6555 NW 36 St #103  
MIAMI, FL 33166

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 19th day of December, 2005.

Signature(s) of Incorporator (s)

  
Arnaldo A. Chavez

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

T & A DIAGNOSTIC CENTER INC.

2. The name and address of the registered agent and office is :

ARNALDO A. CHAVEZ  
6555 NW 36 Street #103  
Miami, Fl 33166

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SPECIAL AGENT IN CHARGE  
TAX AND AGENT  
DEPARTMENT OF STATE  
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Signature Alex

Title Pres. Date 12/19/05

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature Alex

Date 12/19/05