

## Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

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# FLORIDA PROFIT/NON PROFIT CORPORATION

## diamond medical enterprises inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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### Articles of Incorporation

The undersigned incorporator, for the purpose of forming a corporation under the Florida OF JULED PAREAS Business Corporation Act, hereby adopts the following Articles of Incorporation.

<u>ARTICLE I NAME</u>

The name of the corporation shall be: Diamond Medical Enterprise Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6363 Taft Street Suite 302 Hollywood, Fl 33314

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: The number shares which this corporation shall have the authority to issue is 100 shares of common stock NO PAR VALUE. Each share shall have equal rights to each other share with respect to dividends voting and in liquidation.

#### ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Erica Wilson

6363 Taft Street Suite 302

Hollywood, Fl 33314

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Erica Wilson

6363 Taft Street Suite 302

Hollywood, Fl 33314

#### ARTICLE VI OFFICERS AND DIRECTORS

Erica Wilson

5180 SW 43 terr # A

ort Lauderdale Fl 33314

Signature/Incorporator

(An additional article must be added if an effective date is requested.) Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certicate, I hereby accept the appoint ment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues relating to the proper and complete performance of my dutide, and I am familiar with and accept the ob ligations of my position as registered agent.

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