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CSH SERVICES

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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

Sleep Diagnostics of Pinellas Inc.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

SLEEP DIAGNOSTICS OF PINELLAS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business address is:

2595 TAMPA ROAD SUITE J

PALM HARBOR, FLORIDA 32684

The mailing address is:

6265 SUN BLVD UNIT 211

SAINT PETERSBURG, FLORIDA 33715

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT

SANDRA MILHOAN

6265 SUN BLVD UNIT 211

SAINT PETERSBURG, FLORIDA 33715

VICE PRESIDENT

JIM KRAMER

6265 SUN BLVD UNIT 211

SAINT PETERSBURG, FLORIDA 33715

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PAGE 2 SLEEP DIAGNOSTICS OF PINELLAS INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

SANDRA MILHOAN
6265 SUN BLVD UNIT 211
SAINT PETERSBURG, FLORIDA 33715

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

SANDRA MILHOAN
6265 SUN BLVD UNIT 211
SAINT PETERSBURG, FLORIDA 33715

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


SANDRA MILHOAN / Registered Agent

3-31-08
Date


SANDRA MILHOAN / Incorporator

3-31-08
Date

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