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(Requestor's Name)

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☐ PICK-UP ☐ WAIT ☐ MAIL

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TALLAHASSEE, FLORIDA

T. Burch AUG 2 2013

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

RADD DIAGNOSTICS INC

Signature \_\_\_\_\_

Requested by: SETH

08/01/13

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

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\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

ARTICLES OF INCORPORATION  
OF

**RADD DIAGNOSTICS INC**

THE UNDERSIGNED SUBSCRIBER (S) TO THESE ARTICLES OF  
OF INCORPORATION, NATURAL PERSON (S) COMPETENT TO CONTRACT  
HEREBY FORM A CORPORATION UNDER THE LAWS OF THE STATE  
OF FLORIDA.

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TALLAHASSEE, FLORIDA

**ARTICLE 1- CORPORATE NAME**

THE NAME OF THE CORPORATION IS: **RADD DIAGNOSTICS INC**  
THE PRINCIPLE MAILING ADDRESS OF CORPORATION IS:  
**3351 S PALM AIRE DR # 301**  
**POMPANO BEACH, FLORIDA 33069**

**ARTICLE 11 – DURATION**

THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED ACCORDING  
TO FLORIDA LAW.

**ARTICLE III – PURPOSE**

THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY  
ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES  
AND THE STATE OF FLORIDA.

**ARTICLE IV – CAPITAL STOCK**

THE CORPORATION IS AUTHORIZED TO ISSUE (five hundred) SHARES (500 ) OF  
(one dollar (s) (\$ 1.00 ) PAR VALUE COMMON STOCK, WHICH SHALL BE  
DESIGNATED "COMMON STOCK"

## **ARTICLE V – INITIAL REGISTERED AGENT AND MAILING ADDRESS.**

**THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS:**

**NAME: JOANIE PAIEMENT  
PRINCIPLE AND MAILING ADDRESS:  
3351 S PALM AIRE DR # 301  
POMPANO BEACH, FLORIDA, 33069**

## **ARTICLE VI – INITIAL BOARD OF DIRECTORS**

**THIS CORPORATION SHALL HAVE ONE ( 1 )  
DIRECTORS INITIALLY, THE NUMBER OF DIRECTORS MAY BE INCREASED OR  
DIMINISHED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS  
THAN ONE (1)**

**CORPORATION DIRECTOR (1)**

**NAME: JOANIE PAIEMENT  
PRINCIPLE AND MAILING ADDRESS; 3351 S PALM AIRE DR #301  
CITY AND STATE AND ZIP CODE: POMPANO BEACH, FLORIDA 33069**

**NAME:  
PRINCIPLE AND MAILING ADDRESS:  
CITY AND STATE AND ZIP CODE:**

**PRINCIPLE AND MAILING ADDRESS:  
CITY AND STATE AND ZIP CODE:**

## **ARTICLE VII – INCORPORATORS**

**THE NAME AND ADDRESSES OF THE PERSONS (S) SIGING THESE ARTICLES OF  
INCORPORATION ARE AS FOLLOWS:**

**NAME: JOANIE PAIEMENT  
PRINCILPE AND MAILING ADDRESS: 3351 S PALM AIRE DR #301  
CITY, STATE AND ZIP CODE: NORTH LAUDERDALE, FLORIDA 33068**

**NAME:  
PRINCIPLE AND MAILING ADDRESS:  
CITY, STATE AND ZIP CODE:**

**CERTIFICATE AND ACKNOWLEDGEMENT OR REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT OF: RADD DIAGNOSTICS INC**  
(NAME OF CORPORATION)

**PURSUANT TO FLORIDA STATUTE SECTIOCYNS 48.091 AND 607.304, THE  
FOLLOWING 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:**

**ADDRESS: 3351 S PALM AIRE DR #301  
POMPAÑO BEACH, FLORIDA 33069**

**HAS NAMED: JOANIE PAIEMENT**

**LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT  
SERVICE OF PROCESS WITORTHIN THIS STATE.**

**ACKNOWLEDGEMENT**

**HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED  
CORPORATION AT THE PLACE DESIGNATED INTHIS CERTIFICATE, I HEREBY  
ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE  
PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE.  
I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES  
AS A REGISITERED AGENT.**

**Registered Agent)**

  
\_\_\_\_\_  
**ANIE PAIEMENT**

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (S) HAVE  
THESE ARTICLES OF INCORPORATION THIS 25 June 2013

*Joanie Paiement*

(SIGN)

(SIGN)

L

STATE OF FLORIDA

SS

COUNTY OF: DUVAL

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE  
ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE  
PERSONALLY APPEARED: JOANIE PAIEMENT

KNOWN TO ME AND KNOWN TO BE THE PERSON (S) WHO EXECUTED THE  
FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGE BEFORE  
ME THAT (HE) OR (SHE)  
EXECUTED THESE ARTICLES OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE  
STATE AND COUNTY AFORESAID THIS 23 DAY OF JULY 2013

(NOTARY PUBLIC, STATE OF FLORIDA AT LARGE)

*Linda L. Wilson*

LINDA L. WILSON  
MY COMMISSION EXPIRES 2-10-2017  
COMMISSION NUMBER #EE873062

