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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

	Address:	
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## FLORIDA PROFIT/NON PROFIT CORPORATION RC DIAGNOSTIC SERVICES INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

• • • •

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

<b>ARTICLE 1</b> NAME: The name of the corporation is:	
RC Diggrastic Services	INC
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:  6940 NW 18657 #1430  Hialah, Fl 331/5	2021 H
ARTICLE III SHARES: The number of shares of stock is:	2021 MAK 23 F
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	PH 4:49
	<u> </u>
The name and Florida street address (PO Box not acceptable) of the registered as  RAUL BERNARDO CRUZ	
RAUL BERNARDO CRUZ 6940 NW 186 ST # 1430 HIALEAH FL 33015	<u>C</u>
ARTICLEVI INCORPORATOR: The name and address of the Incorporation CRUZ  O940 NW 186 ST. #14  Higledh FL 33015	ator is:
Hidlean the 33015	<del></del>

## Required Signatures:

3052201440

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 familian with and accept the appointment as registered agent and agree to act in this capacity

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a

Date

Date