1201 HAYS STREET TALLAHASSTE, FL 32301 800-342-8086



I FOALK FINANCEAL	ACCOUNT NO. 1 07210000	
	REFERENCE : 575339	9907▲
	COST LIMIT : 9 122.50	ato
ORDER DATE	: April 11, 1995	
ORDER TIME	: 9:57 AM	
ORDER NO.	: 575339	
CUSTOMER N	D: 9907 <b>A</b>	100001453011
CUSTOMER:	Monroe Gelb, Esq GELB & SPATZ	
	3400 S.w. 3rd Avenue	
	Miami, FL 33145	

### DOMESTIC FILING

	Simor Struices	95 TAL
	NAME: DIAGNOSTICS, INC.	APR II CRETARY C
ΚX	ARTICLES OF INCORPORATION  CERTIFICATE OF LIMITED PARTNERSHIP	FN 2: 39 F STATE FLORIDA
PLEAS	E RETURN THE FOLLOWING AS PROOF OF FILING:	•
(X	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

1095-7805

Jennifer Moran

EXAMINER'S INITIALS:

T. BROWN APR 1 2 1995



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 12, 1995

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: DIAGNOSTICO, INC. Ref. Number: W95000007805

We have received your document for DIAGNOSTICO, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 795A00016586

ARTICLES OF INCORPORATION

OF

SECRETARY OF STATE
TALLAHASSEE, FILORIDA

SENIOR DIAGNOSTIC SERVICES, INC.

### **ARTICLE 1**

The name and physical address of the corporation is:

Sentor Diagnostic Services, Inc. 6982 Southwest 152 Court Miami, Florida 33193-2209

### ARTICLE II

This corporation shall have perpetual duration:

#### ARTICLE III

The purpose for which this corporation is organized is the transaction of any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

#### ARTICLE IV

The aggregate number of shares the corporation is authorized to issue is one hundred (100) shares, each share to be of \$100.00 par value.

### ARTICLE V

The street address of the registered agent of the corporation is 6982 Southwest 152 Court, Miami, Florida 33193-2209, and the name of the registered agent is Pedro R. Vilallonga.

## ARTICLE VI

The number of directors constituting the initial Board of Directors of the corporation is one (1) and the name and address of the person serving as director until his successor(s) is/are elected is:

## **NAME:**

## ADDRESS:

Pedro R. Vilallonga

6982 Southwest 152 Court Miami, Florida 33193-2209

## **ARTICLE VII**

The name and address of the sole incorporator is:

# NAME:

### ADDRESS:

Pedro R. Vilallonga

6982 Southwest 152 Court Miami, Florida 33193-2209

Dated this 10 day of April, 1995.

PEDRO R/VII ALLONG

STATE OF FLORIDA )	
COUNTY OF DADE )	
Vilallonga who is personally known or known to be the person described in and	at on this day before me personally appeared Pedro R. exhibited his drivers license as identification to me who executed the foregoing Articles of Incorporation ecuted same of his voluntary act and deed.
Witness my hand and seal April, 1995.	in the County and State last aforesaid this 10th day of
	NOTARY PUBLIC, STATE OF FLORIDA
My commission expression expression expression	A DE TERRE

The underlighted her by a delight the designation of registered agent in the State of Florida for Senior Diagnostic Services, for ., and hereby agrees to serve as registered agent until which designation is terminated in accordance with the Florida General Corporation Act.

STATE OF FLORIDA

)SS COUNTY OF DADE

I HEREBY CERTIFY that on this day before me personally appeared Pedro R. Vilallonga who is personally known or exhibited his drivers license as identification to me known to be the person described in and who executed the foregoing Acceptance of Designation as Registered Agent and acknowledged before me that he executed same of his voluntary act and deed and he did or did not take an oath.

Witness my hand and seal in the County and State last aforesaid this 13th day of April, 1995.

My commission expires:

