

P95000033425

LAZARUS CORPORATE INDUSTRIES, INC.  
(Requestor's Name)  
890 S.W. 87 AVENUE, SUITE 16  
(Address)  
MIAMI, FLORIDA 33174 (305)552-5973  
(City, State, Zip) (Phone #)  
LOCAL REPRESENTATIVE TALLAHASSEE  
(904)385-6735

OFFICE USE ONLY

FILED  
SECRETARY OF CORPORATIONS  
DIVISION  
95 APR 28 PM 2:55

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-05/03/95--01069--011  
\*\*\*\*122.50 \*\*\*\*122.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Duke Medical & Diagnostic Center, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ARTICLES OF INCORPORATION  
OF

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 APR 28 PM 2:55

DUKE MEDICAL & DIAGNOSTIC CENTER, INC.

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate(s) themselves together to form a corporation under the laws of the State of Florida.

Article I. Name

The name of this corporation is:

DUKE MEDICAL & DIAGNOSTIC CENTER, INC.

Article II. Nature of Business

The general nature of the business to be transacted by this corporation is: medical offices, medical center, laboratory, diagnostic center and any and all medically related business permitted under the laws of the State of Florida

To conduct business in, have one of more officers in, and buy, hold, mortgage, sell, convey, lease or otherwise dispose of real and property, including franchises, patents, copyrights, trademarks and licenses, in the State of Florida, and in all other States and States and Countries.

To conduct debts and borrow money, issue and sell or pledge bonds, debentures, notes and other evidences of indebtedness, and execute such mortgages, transfers or corporate property, or other instruments to secure the payment of corporate indebtedness as required.

To purchase the corporate assets of any other corporation and engage in the same or other character of business.

To guarantee, endorse, purchase, hold, sell, transfer, mortgage, pledge or otherwise acquire or dispose of the shares of the capital stock of, or any bonds, securities, or other evidences of indebtedness created by any other corporation of the State of Florida or any other State government, and while owner of such stock, to exercise all the rights, powers and privileges of ownership, including the right to vote such stocks.

#### Article III. Capital Stock

The maximum number of shares of stock this corporation is authorized to have outstanding at any time is 100 shares of common stock having a nominal of \$1.00, par value.

#### Article IV. Initial Capital

The amount of capital with which this corporation will begin business is \$500.00.

#### Article V. Term of Existence

This corporation is to exist perpetually.

#### Article VI. Address

The initial post office address of the initial office of this corporation in the State of Florida is 8372 S.W. 8th Street, Miami, Florida 33144.

The Board of Directors may, from time to time, move the principal office to any other address in Florida.

#### Article VII. Directors

The Corporation shall have 1 Directors initially. The number of Directors may be increased or diminish from time to time, by-laws adopted by the stockholders, but shall never be less than one.

Article VIII. Initial Directors and Officers

The names and post office addresses of the members of the first Board of Directors is:

<u>Name</u>	<u>Address</u>	<u>Office</u>
Lorenzo G. Aedo	8372 S.W. 8th Street Miami, Florida 33144	President Secretary/Director Treasurer

Article IX. Subscribers

The names and post offices address(es) of each subscriber to these Articles of Incorporation are:

Lorenzo G. Aedo  
8372 S.W. 8th Street  
Miami, Florida 33144

Article X

REGISTERED AGENT AND OFFICE

The Registered Agent and Office shall be:

Lorenzo G. Aedo  
8372 S.W. 8th Street  
Miami, Florida 33144

Article XI AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholder's meeting by a majority of the stock entitled to vote thereof.

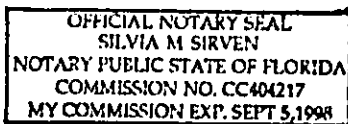
  
LORENZO G. AEDO

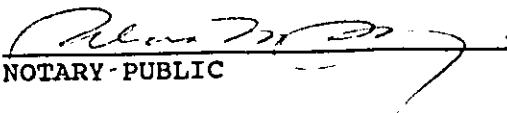
President

STATE OF FLORIDA     )  
                                  SS  
COUNTY OF DADE     )

BEFORE ME, the undersigned authority, personally appeared,  
LORENZO G. AEDO, who after by me first being duly sworn,  
depose(s) and state(s) that he executed the above and foregoing  
Articles of Incorporation of his own free will and for the purposes  
therein expressed.

WITNESS my hand and official seal at Miami, Dade County,  
Florida, this 27<sup>th</sup> day of April, 1995.



  
NOTARY - PUBLIC

My commission expires:

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: \_\_\_\_\_

\_\_\_\_\_ **DUKE MEDICAL & DIAGNOSTIC CENTER, INC.** \_\_\_\_\_

2. The name and address of the registered agent and office is:

\_\_\_\_\_ **LORENZO G. AEDO** \_\_\_\_\_

NAME

\_\_\_\_\_ **8372 S.W. 8th Street** \_\_\_\_\_

(P.O. BOX NOT ACCEPTABLE)

\_\_\_\_\_ **Miami, Florida 33144** \_\_\_\_\_

(CITY/STATE/ZIP)

SIGNATURE \_\_\_\_\_

(corporate officer)

TITLE \_\_\_\_\_ **President** \_\_\_\_\_

DATE \_\_\_\_\_ **April 25, 1995** \_\_\_\_\_

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ **April 25, 1995** \_\_\_\_\_