# P950000 39542

95 HAY 18 FH 2: 02 SECRETARY PLSTATE

Examiner's Initials

		277 A CONTRACTOR STATE
LAZARUS CORPORATE INDUSTRIES, INC. (Requestor's Name)		ALLAHASSEE FLOWER
B90 S.W. 87 AVENU	E. SUITE: 16	
·	3174 (305)552-5973 (?hone #)	OFFICE USE ONLY
LOCAL REPRESENTAT	IVE TALLAHASSEE	
(904)385-6735		
		000001494980 -05/19/9501091005 ****122.50 ****122.50
CORPORATION NAME	(s) & DOCUMENT NUN	ABER(S) (if known):
1. PAA A	ADIO Logist S	TAFLING INC.
2	O	
(Corporation	Name)	(Document #)
(Corporation	Nome)	(Document #)
4. (Corpore don	Name)	(Document #)
r-t	up time	Certified Copy
		-El
Mail out Wil	l wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Offic	er/Director
Limited Liability	Change of Registered Age	nt
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER EN MCC	REGISTRATION/	
OTHER FILINGS Annual Report	QUALIFICATION	NANCY HENDRICKS MAY: 1 8 1995
Fictitious Name	Foreign	NANCY HENDHIONS
Name Reservation	Limited Partnership	
Maine neservation	Reinstatement	
<u> </u>	Trademark	

Other

CR2E031(10/92)

# ARTICLES OF INCORPORATION

OF

P & A RADIOLOGIST STAFFING INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

P & A RADIOLOGIST STAFFING INC.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

## ARTICLE 111

The general nature of the business and objects and pure ses proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers:
  To have perpetual succession by its corporate name;

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ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 1,000 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corpora-

tion shall be:

ARMANDO PEÑAS 947 S.W. 122 AVE. MINORCA PLAZA MIAMI, FL. 33184

The Principal office shall be:

MINORCA PLAZA 947 S.W. 122 AVE. MIAMI, FL. 33184

#### ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the person who is to serve as an initial director is:

PRESIDENT:

ARMANDO PENAS MINORCA PLAZA 947 S.W. 122 AVE. MIAMI, FL. 33184 The name and address of the incorporator executing these Articles of Incorporation is:

ARMANDO PENAS MINORCA PLAZA 947 S.W. 122 AVE. MIAMI, FL. 33184

(ve) executed these Articles OI INCO	IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 17 day		
of MAY , 19 95			
STATE OF FLORIDA ) COUNTY OF DADE )			

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally
appeared known to me and
known by me to be the person(s) who executed the foregoing
Articles of Incorporation, and he (they) acknowledge before
me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this \_\_\_\_\_\_\_, day of \_\_\_\_\_\_\_\_, 19\_\_\_\_.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

My Commission Expires:

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: P & A RADIOLOGIST STAFFING INC.
2.	The name and address of the registered agent and office is:
	ARMANDO PENAS
	(NAME)
	MINORCA PLAZA 947 S.W. 122 AVENUE
	(P.O. ROX <u>NOT</u> ACCEPTABLE)
	MIAMI, FLORIDA 33184
	(CITY/STATE/ZIP)
PR TH AN PF	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF IOCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN IIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT ID AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE ROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PER-DRANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
	SIGNATURE