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MIAMI, PLORIDA	33174 (305)552-9	OFFICE USE ONLY
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1904) 385-6735		
CORPORATION N.	ME(s) & DOCUMENTA	****
	-	(UMBER(S) (if known);
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NEW FILINGS	AMENDMENTS	
Profit		
NonProfit	Amendment	
· · · · · · · · · · · · · · · · · · ·	Resignation of R.A., Off	cer/Director
Limited Liability	Change of Registered Ag	ent
Domestication	Dissolution/Withdrawal	
Other	Merger	
	1	
OTHER FILINGS	REGISTRATION/	
Annual Report	QUALIFICATION	
	Foreign	NANCY HENDRICKS JUN 1 9 1995
Fictitious Name	Limited Partnership	IMULA .
Name Reservation	 	
	Reinstatement	No.

Examiner's Initials

Trademark

Other

CR21.011(10/92)



55 July ...

ARTICLE I. MANE

The name of this Corporation is CDE MEDICAL TESTING. INC.

ARTICLE II. MATURE OF BUSINESS

CDE MEDICAL TESTING. INC. is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III. TERM OF EXISTENCE

The duration of <u>CDE MEDICAL TESTING</u>, INC. is perpetual.

ARTICLE IV. CAPITAL STOCK

<u>CDE MEDICAL TESTING. INC.</u> is authorized to issued 100 shares of common stock, par value \$1.00 per share.

ARTICLE V. ADDRESS

The Principle address of the initial registered office of CDE
MEDICAL TESTING, INC. is:

17417 NW 63rd AVE MIAMI, FL 33015

and the name of the initial registered agent of this corporation at this address is IRALDO CURBELO.

ARTICLES VI. INITIAL DIRECTORS

CDE MEDICAL TESTING. INC. shall have three (3) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial directors are:

DR. ALFONSO DEL REAL 10630 NW 19th PL PEMBROKE PINES, FL 33026

IRALDO CURBELO 17417 NW 63rd AVE MIAMI, FL 33015

ROBERT ESTRADA 630 W 39th ST HIALEAH, FL 33012 PRESIDENT/SECRETARY DIRECTOR

VICE-PRESIDENT DIRECTOR

TREASURER DIRECTOR

ARTICLE VII. INCORPORATORS

The name and addresses of the incorporator of this corporation are:

DR ALFONSO DEL REAL 10630 NW 19th PL PEMBROKE PINES, FL 33026

IRALDO CURBELO 17417 NW 63rd AVE MIAMI, FL 33015

ROBERT ESTRADA 630 W 39th ST HIALEAH, FL 33012

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this $30 \, \text{th}$ day of May 1995.

STATE OF PLORIDA)
COUNTY OF DADE)

DR ALFONSO DEL REAL

INCORPORATOR

IMALDO CURBELO INCOMPORATOR

ROBERT ESTRADA INCORPORATOR

Before me, a notary public authorized take acknowledgements in the State and County seats above, personally appeared <u>DR ALFONSO DEL REAL. IRALDO CURBELO. & ROBERT ESTRADA</u>, known to me and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that 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 30th day of May 1995.

NOTARY PUBLIC

STATE OF FLORIDA AT LARGE

My Commission Expires:

ACCEPTANCE OF APPOINTMENT

QZ

REGISTERED AGENT

Fursuant 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.

designating the registered office/registered agent, in the state of Florida.										
1.	The	name	of	the corp	oration	is:CDE	MED	CAL TES	ring. I	ic.
2.	The	name	and	address	of the IRALDO			agent a	nd offic	e is:
					17417 N			-	·	
		_			MIAMI.	FL 3	3015	·-··		· - · · · · · · · · · · · · · · · · · ·
					SIGNA TITLE DATE_	PRES	UDENT 30,	Well e	ell,	

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 MAY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MAY POSITION AS REGISTERED AGENT.

DATE May 30, 1995