P95000072188

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

717676760 1 55571 97 -03/10/95--01052 --014 ++++70.00 +++++70.00

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$ 70.00

MITCHELL C. RAPPAPORT

218 S 12TH AVENUE

HOLLYWOOD, FL 33019

305-927-1901

SEEP 18 AN 10: 31

Note: Please provide the original and one copy of the articles.



NORTHERN DIAGNOSTIC SERVICES, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1__NAME

The name of the corporation shall be:

NORTHERN DIAGNOSTIC SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

218 S 12TH AVENUE HOLLYWOOD, FLORIDA 33019

ABTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANDREW A. HOLOWATY 1920 E HALLANDALE BCH. BLVD #805 HALLANDALE, FL 33009

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MITCHELL RAPPAPORT

218 S 12TH AVENUE

HOLLYWOOD, FLORIDA 33019

Articles of Incorporation Filing Fee - \$35

Signature

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: NORTHERN DIAGNOSTIC SERVICES,	INC.
2.	The name and address of the registered agent and office is:	
	ANDREW A. HOLOWATY	
	(NAME)	
	1920 E. HALLANDALE BCH. BLVD #805	
	(P.O. BOX NOT ACCEPTABLE)	
	H. LLANDALE, FLORIDA 33009	·
	(CITY/STATE/ZIP)	

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.

DATE 9-14-95 ALLANASSEE, FLORIS