

P96000040519

TRANSMITTAL LETTER

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

20000001 75021 2121  
-047247-001-01024-000  
400122.00 8444122.50

SUBJECT: CENTRAL FLORIDA DIAGNOSTIC, INC.  
(Proposed corporate name - must include suffix)

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FILED  
MAY 13 AM 8:44  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

FROM: CENTRAL FLORIDA DIAGNOSTIC, INC. / WIDILIA SALDANA  
Name (printed or typed)

P.O. BOX 574646

Address

ORLANDO, FLORIDA 32807-4646  
City, State & Zip

407-850-6028

Daytime Telephone number

MAY 13 1996

APR 29 1996

W- 9090  
BSB

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



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

April 29, 1996

WIDILIA SALDANA  
P. O. BOX 574646  
ORLANDO, FL 32807-4646

SUBJECT: CENTRAL FLORIDA DIAGNOSTIC, INC.  
Ref. Number: W96000009090

*L's W Diagnostic*

We have received your document for CENTRAL FLORIDA DIAGNOSTIC, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(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) 487-6925.

Brenda Baker  
Corporate Specialist

Letter Number: 496A00020287

**L&W DIAGNOSTIC**  
**P.O. BOX 574646**  
**ORLANDO,FL 32807-4646**

MAY 8,1996  
BRENDA BAKER  
CORPORATE SPECIALIST  
SUBJECT: CHANGE NAME:CENTRAL FLA. DIAG.  
TO:L & W DIAGNOSTIC  
REF. NUMBER: W96000009090

IF YOU NEED MORE INFORMATION,PLEASE CALL (407)850-6028.

WIDILIA SALDANA  
PRESIDENT

## ARTICLES OF INCORPORATION

*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 I NAME

The name of the corporation shall be:

L & W DIAGNOSTIC INC.

### ARTICLE II PRINCIPAL OFFICE

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

PRINCIPAL PLACE:  
1214 PERCH LANE  
ORLANDO, 32839  
FLORIDA,

MAILING: P.O. BOX 574646  
ORLANDO, FL 32807

### ARTICLE III SHARES

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

ONE THOUSAND

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WIDILIA SALDANA  
1214 PERCH LANE, ORLANDO, FLORIDA, 32839

FILED  
96 MAY 13 AM 8:44  
TALLAHASSEE, FLORIDA

**ARTICLE V INCORPORATOR(S)**

**See Instructions for officers/directors**

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

WIDILIA SALDANA  
3533 N LAKE MANN DR  
ORLANDO, FL 32805

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12 day of APRIL, 19 96.

(An additional article must be added if an effective date is requested.)

Widilia Saldaña  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
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: L & W DIAGNOSTIC INC.

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

WIDILIA SALDANA  
(NAME)

1214 PERCH LANE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ORLANDO, FLORIDA, 32839  
(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.*

Widilia Saldana  
(SIGNATURE)

12-april-1996  
(DATE)