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1. M & M (Corp	NAME(S) & DOCUM DIP GNOSTIC Poration Name)	/ NC.	#) 11.00002225	
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Mail out	Pick up time 2- Will wait DP AMENDMENT		#) Certified Copy Certificate of Stand	2 PH :: 7
Profit NonProfit Limited Liability Domestication	Amendment Resignation of R.A., Change of Registered Dissolution/Withdra	Officer/ Director	G	5 ,
Other OTHER FILINGS Annual Report Fictitious Name	Merger REGISTRAT QUALIFICA Foreign Limited Partnership	TON S	TALLAHASSEE, S (CALLANA)	RECEIVED 97 AUG 12 AN II: 30
Name Reservation	Reinstatement Trademark Other		Examiner's Initials	.: 30 D

CR2E031(1/95)

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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 | NAME

The name of the corporation shall be:

M & M DIAGNOSTIC. INC.

97 AUG 12 PH 1: 17
SECRETARY OF STATE

ARTICLE II PRINCIPAL OFFICE

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

7221 Coral Way suite 200 Miami. Florida 33155

ARTICLE III SHARES

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

1.00 Per Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MIYRIAM LAURA ANDIARENA 13800 S.W. 8th Street Apt. 283 Miami, Florida 33184

ARTICLE V INCORPORATOR(S)

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

Myriam Laura Andiarena 13800 S.W. 8th Street Suite 283 Miami. Florida 33184

ARTICLE VI DIRECTOR(S)

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

Myriam Laura Andiarena 13800 S.W. 8th Street Apt. 283 Miami, Florida 33184

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this _______, 19_97___.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

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.

The name of the corporation is: M S M DIAGNOSTIC INC
The name and address of the registered agent and office is:
Myriam Laura Andierena (NAME)
13800 SW 8th Street Apt. 283 .
(P.O. BOX <u>NOT</u> ACCEPTABLE)
Miami, Florida 33184 (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.

SIGNATURE AUGUST 11. 1997 F. STATE AUGUST 11. 1997 F. STATE FLORIDZ

REGISTERED AGENT FILING FEE: \$35.00