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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 SEP 29 AM 11:35

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

100002305861 --2  
-09/29/97--01077--007  
\*\*\*\*122.50 \*\*\*\*122.50

Dear Sir:

Enclosed please find check in the amount of \$122.50  
together with original and one copy of Articles of  
Incorporation for the following corporation:

PEC MEDICAL, INC.

Please send certified copy of same to the undersigned.

Sincerely,

RICHARD J. HAYS, P.A.

*Richard J. Hays*  
Richard J. Hays

RJH:cb.s/encls.

**ARTICLES OF INCORPORATION**

**OF**

**PEC MEDICAL, INC.**

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DIVISION OF CORPORATIONS  
97 SEP 29 AM 11:35

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:

PEC MEDICAL, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4545 NW 103 Ave.  
Suite 201  
Sunrise, FL 33351

**ARTICLE III CAPITAL STOCK**

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

100 Shares @ \$10.00 par value

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

EDWARD PERL  
4545 NW 103 Ave.  
Suite 201  
Sunrise, FL 33351

**ARTICLE V INCORPORATOR(S)**

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

EDWARD PERL  
4545 NW 103 Ave.  
Suite 201  
Sunrise, FL 33351

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

22nd day of May, 19 97.

  
\_\_\_\_\_  
Signature/Title

EDWARD PERL, President  
\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

**CERTIFICATE OF DESIGNATION**  
**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: \_\_\_\_\_  
PEC MEDICAL, INC.

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

EDWARD PERL

(NAME)

4545 NW 103 Ave., Suite 201

(P.O. BOX ~~NOT~~ ACCEPTABLE)

Sunrise, FL 33351

(CITY/STATE/ZIP)

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DIVISION OF CORPORATIONS  
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SIGNATURE


  
(corporate officer)

TITLE EDWARD PERL, President

DATE May 22, 1997

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

  
EDWARD PERL

DATE May 22, 1997

REGISTERED AGENT FILING FEE: \$35.00