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CORPORATION	NAME(S) & DOCUM	ENT NUMBER(S)), (if known):	
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NEW-FILINGS: Profit	AMENDMENT Amendment	``````````````````````````````````````	80000234 -11/12/97 ****122.	44682 01049012 50 ****122.50
NonProfit Limited Liability	Resignation of R.A. Change of Registers	ed Agent		
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Annual Report Fictitious Name Name Reservation	REGISTRA QUALIFICA Foreign Limited Partnership Reinstatement	TION		<u> </u>
	Trademark Other		Examiner's Initials	11-17-97

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 1 NAME

The name of the corporation shall be:

South Florida Cardio Care Monitoring Services, Inc.

ARTICLE 11 PRINCIPAL OFFICE

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

Place: 10473 SW 55 St Miami, F1 33165

Mailing Address: PO BOX 832467

Miami FL 33283

ARTICLE 111 **SHARES**

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

\$1.00 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Raul A Fernandez 10473 SW 55 Street Miami FL 33165

ARTICLE V INCORPORATOR (S)

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

Raul A Fernandez 10473 SW 55 Street Miami FL 33165

ARTICLE VI DIRECTOR (S)

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

Raul A Fernandez 10473 SW 55 Street Miami Fl 33165

Maria G Hernandez 10473 SW 55 Street Miami Florida 33165

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

03 ___day of **11** ____, 19 **97**

Signature

<u>CERTIFICATE OF DESIGNATION</u> 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:	South Florida	Cardio	Care 1	Monitoring	Services	Inc
2.	The name and address of the reg	gistered agent and office	e is:	-		DIVISION	
	Rau1	A Fernandez					-
		(NAME)	•			7	
	10473	SW 55 Street				FST	
	(P	O BOX NOT ACCEPT	TABLE)			京器	
	Miami	Florida 3316	5			5 2	-

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED INCORPORATION 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.

(CITY/STATE/ZIP)

IGNATURE Kaul A Jeman

DATE November 03, 1997