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DATE

FEBRUARY 28, 1998

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

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-03/03/98--01093--007  
\*\*\*122.50 \*\*\*122.50


Re: COR DIAGNOSTICS, Inc.  
(Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with a check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

  
(Individual's Name)  
Kevin B. Workman

COR DIAGNOSTICS, INC.

(Name of Corporation)

F. CHESSEY MAR 4 1998

MAILING ADDRESS OF CORPORATION		
7027 W. Broward Blvd., Suite 237		
Plantation, Florida 33317		
PHONE		
(954)	428-4888	
Area Code	Number	Ext.

# ARTICLES OF INCORPORATION

of

**COR DIAGNOSTICS, INC.**

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

**COR DIAGNOSTICS, INC.**

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue **500** shares of common stock, par value \$ **1.00** per share.

## ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS			
12648 N.W. 13th Street			
CITY	Sunrise	FLORIDA	ZIP 33323

Mailing address, if different

STREET ADDRESS			
7027 West Broward Blvd. Suite 237			
CITY	Plantation	FLORIDA	ZIP 33317

## ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME Kevin B. Workman			
ADDRESS 12648 N.W. 13th Street			
CITY	Sunrise	FLORIDA	ZIP 33323

### ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Kevin B. Workman		
ADDRESS	12648 N.W. 13th Stree		
CITY	Sunrise	STATE	Florida ZIP 33323
NAME	Vincent J. Ciccone		
ADDRESS	5500 N.W. 40 Terrace		
CITY	Coconut Creek	STATE	Florida ZIP 33073
NAME			
ADDRESS			
CITY		STATE	ZIP

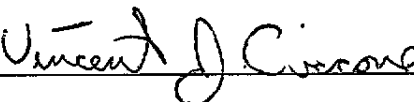
### ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Kevin B. Workman		
ADDRESS	12648 N.W. 13th Street		
CITY	Sunrise	STATE	Florida ZIP 33323
NAME	Vincent J. Ciccone		
ADDRESS	5500 N.W. 40 Terrace		
CITY	Coconut Creek	STATE	Florida ZIP 33073
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 28th day of February, 19 98.

 (Signature)

 (Signature)

\_\_\_\_ (Signature)

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE

**COR DIAGNOSTICS, INC.**

*(name of corporation)*

FILED  
98 MAR -3 PM 2:32  
TALLAHASSEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

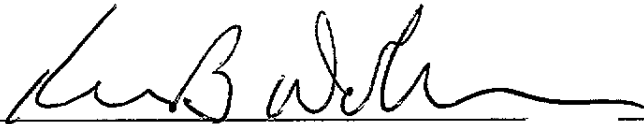
at 12648 N.W. 13th Street

Sunrise Florida 33323

has named Kevin B. Workman

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)

2/28/98  
(Date)