

OFFICE USE ONLY

LAZARUS CORPORATE FILING SERVICE, INC.

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

500002489135--
-04/15/98--01025--015
*****122.50 *****122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ~~BIOLAB, INC~~
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)



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2:00



Certified Copy



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Will wait



Photocopy



Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

K. Rofie

APR 15 1998

W98-8483

FILED
98 APR 16 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 APR 15 AM 11:19
DIVISION OF CORPORATION

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

April 15, 1998

LAZARUS

MIAMI, FL

SUBJECT: BIOLAB, INC.
Ref. Number: W98000008483

We have received your document for BIOLAB, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(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 a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 998A00020225

RECEIVED
DIVISION OF CORPORATIONS
APR 16 PM 2:55

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:

BIO LAB CLINICAL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 APR 16 PM 3:14

FILED

ARTICLE II PRINCIPAL OFFICE

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

1350 SW 125 CT
MIAMI FLA 33184

ARTICLE III SHARES

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

400

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SERGIO BOCANEGRA
1350 SW 125 CT
MIAMI FLA 33184

ARTICLE V INCORPORATOR(S)

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

Pres SERGIO BOCANEGRA 1350 SW 125 CT
MIAMI FLA 33184

V Pres RITA AMPUDIA 7267 SW 112 PL Circle
MIAMI FLA 33173

ARTICLE VI DIRECTOR(S)

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

(Pres) SERGIO BOCANEGRA 1350 SW 125 CT
MIAMI FLA 33184

(V Pres) RITA AMPUDIA 7267 SW 112 PL Circle
MIAMI FLA 33173

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 14 day of APRIL, 1998.

Sergio Bocanegra
Signature

Rita Ampudia
Signature

Signature

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.

1. The name of the corporation is: BIO LAB. CLINICAL, INC.

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

SERGIO BOCA NEGRA

(NAME)

1350 SW 125 CT

(P.O. BOX NOT ACCEPTABLE)

MIAMI FLA 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

Sergio Bocanegra

DATE

4/14/98

REGISTERED AGENT FILING FEE: \$35.00

98 APR 16 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED