## 19800004013

Florida Department of State DIVISION OF CORPORATIONS 409 East Gaines Street Tallahassee, Florida 32399

300002508133--9 -05/01/98--01082--011 \*\*\*\*367.50 \*\*\*\*122.50

SUBJECT: AN EXTRA TOUCH HEALTH SERVICES, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate

**\$**122.50

Filing Fee

& Certified Copy

□\$131.25

Filing Fee, Certified Copy

& Certificate

## ADDITIONAL COPY REQUIRED

FROM: William Watson Trick, Jr.

1216 E. Atlantic Blvd., Suite 7

Pompano Beach, Florida 33060

954-942-9774



## ARTICLES OF INCORPORATIO

OF

## Sonar PHO AN EXTRA TOUCH HEALTH SERVICES, INC

ARTICLE 1: CORPORATE NAME: The name of this corporation is AN EXTR HEALTH SERVICES, INC.

ARTICLE 2: PRINCIPAL OFFICE: The street address of the initial principal office of this corporation is 1000 W. McNab Road, Pompano Beach, Florida 33069.

ARTICLE 3: AUTHORIZED NUMBER OF SHARES: This corporation is authorized to issue one thousand shares (1,000) of common stock having no par value.

ARTICLE 4: INITIAL REGISTERED AGENT AND OFFICE: The street address of this corporation's initial registered office is 1216 E. Atlantic Blvd., Suite 7 Pompano Beach, Florida 33060. The name of the initial registered agent of this corporation at that address is William Watson Trick, Jr.

**ARTICLE 5: INCORPORATOR:** The name and address of the incorporator of this corporation is Victoria Luciano, located at 1000 W. McNab Road, Pompano Beach, Florida 33069.

ARTICLE 6: INITIAL DIRECTOR: The name and address of the individuals who are to serve as the initial directors of this corporation are Victoria Luciano, at 1000 W. McNab Road, Pompano Beach, FL and Pamela Cummings, at 1000 W. McNab Road, Pompano Beach, FL.

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.