

P98000062075

Form 1

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUL 13 PM 2:55

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

SUBJECT: Computer Diagnostic Center Inc.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Bruce Gossage
Name (Printed of typed)

2890 Griffin Rd Suite 4
Address

Ft. Lauderdale FL 33312
City, State & Zip

(954) 850-0760
Daytime Telephone number

900002586489-4
-07/13/98-01064-011
*****78.75 *****78.75

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Computer Diagnostic Center Inc.
2. The principal place of business and mailing address of the corporation is: 2890 Griffin Rd. Suite 4, Ft. Lauderdale, FL 33312.
3. The corporation shall have the authority to issue 10,000 shares of stock.
4. The registered agent of the corporation is Bruce H Gossage and the registered street address is 5155 N. Springs Way, Coral Spring,
Florida 33076.
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: Bruce H Gossage 5155 N. Springs Way, Coral Spring,
FL 33076

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Bruce H Gossage whose street address is 5155 N. Springs Way, Coral Spring, FL 33076

Dated 7/9/98

Bruce H Gossage
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 7/9/98

Bruce H Gossage
Registered Agent