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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 18 AM 10:40

November 12, 1998

Department of State, Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

600002690176--3
-11/18/98--01011--008
*****70.00 *****70.00


Re: VASCULAR DIAGNOSTIC SERVICES, INC.

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of VASCULAR DIAGNOSTIC SERVICES, INC. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,



LESLI BREWER
4270 ALOMA AVE. SUITE 124, WINTER
PARK, FL 32792

407 673-8627

Daytime Phone #

D. BROWN NOV 23 1998

**ARTICLES OF INCORPORATION
OF**

VASCULAR DIAGNOSTIC SERVICES, INC.

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ARTICLE I NAME

The name of the corporation shall be VASCULAR DIAGNOSTIC SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 4270 ALOMA AVE. SUITE 124, WINTER PARK,, FL 32792.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares of common stock with no par value.

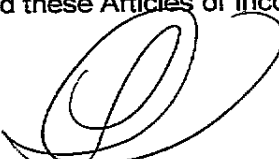
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: LESLI BREWER, 4270 ALOMA AVE. SUITE 124, WINTER PARK,, Florida 32792.

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:
LESLI BREWER, 4270 ALOMA AVE. SUITE 124, WINTER PARK,, FL 32792.

The undersigned incorporator has executed these Articles of Incorporation this 16th
day of NOVEMBER, 1998.



LESLI BREWER
4270 ALOMA AVE. SUITE 124, WINTER PARK,, FL
32792

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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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: VASCULAR DIAGNOSTIC SERVICES, INC.
2. The name of the registered agent and office is:

LESLI BREWER
4270 ALOMA AVE. SUITE 124, WINTER PARK,, Florida 32792

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 _____



DATE _____

11/16/98