USA DIAGNOSTICS 4691 N. UNIVERSITY DRIVE, SUITE 310 CORAL SPRINGS, FL 33067 1-800-273-8798 (305) 970-3934

City/State/Zip

Phone #

Office Use Only

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

1	(Corporation Name)	(Doc	ument#)
2	(Corporation Name)	(D∞:	ument #)
3	(Corporation Name)	(Document #)	
4	(Corporation Name)	(Document #)	
☐ Walk in	Pick up time		Certified Copy
☐ Mail out	☐ Will wait	Photocopy	Certificate of Status

NEW FILINGS ::-	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
<u></u>	Trademark
	Other





Examiner's Initials





b-30035

FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

January 5, 1999

USA DIAGNOSTICS 4691 N. UNIVERSITY DRIVE SUITE 310 CORAL SPRINGS, FL 33067

SUBJECT: DIAGNOSTIC MANANGEMENT, INC.

Ref. Number: W9900000125

We have received your document for DIAGNOSTIC MANANGEMENT, 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 document must have original signatures.

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) 487-6933.

Dana Calloway
Document Specialist

Letter Number: 199A00000242

#### ARTICLES OF INCORPORATION OF

NEW Diagnostic Management, Inc.

The undersigned incorporate to those Articles of Incorporation a Florida corporation, hereby forms a corporation under the laws of the State of Florida.

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## ARTICLE I. CORPORATE NAME:

The name of the corporation is:

NEW Diagnostic Management, Inc.

## ARTICLE II. NATURE OF BUSINESS AND POWERS:

The general nature of the business to be transacted by this corporation is authorized to issue and have outstanding at any one time is Five Hundred (500) shares of voting common stock having a par value of One (\$1.00) Dollar per share. All shares issued shall be fully paid and nonassessable.

#### ARTICLE IV. TERM OF EXISTENCE:

This Corporation shall have perpetual existence.

## ARTICLE V. REGISTERED AGENT AND INITIAL REGISTERED OFFICE:

Registered Agent - Nate Hollander

Registered/Corporate Office - 4691 N. University Dr. # 310 Coral Springs, FL 33067

The Board of Directors may, from time to time, move the Registered Office to any other address in the State of Florida.

## ARTICLE VI. BOARD OF DIRECTORS:

This Corporation shall have ONE (1) Directors initially. The number of Directors may be increased or diminished from time by bylaws adopted by the Shareholders, but shall never be less than one (1).

ARTICLE VII.

INITIAL DIRECTOR:

Nate Hollander 4691 N. University Dr. #310 Coral Springs, FL 33067

> Mate Hollander Signature

The persons named as initial Directors shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE VIII.

INCORPORATOR:

The name and street address of the corporation signing these Articles of Incorporation as the Incorporator is:

Nate Hollander 4691 N. University Dr. #310 Coral Springs, FL 33067

### ARTICLES IX. CONFLICT OF INTEREST:

No contract between this Corporation and another corporation or another individual shall be invalidated by reason of the fact that one or more of the officers or Directors of this Corporation are officers or Directors of the said other corporation, or by reason of the fact that one or more of the officers or Directors of this Corporation may be the other individual or individuals contracting with this Corporation.

## ARTICLE X.

## AMENDMENT:

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the to

Shareholders, and approved at a Shareholders' meeting by at least a majority of the stock entitled to vote thereon, unless all the Directors and all of the Shareholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.
IN WITNESS WHEREOF, the undersigned, as the Incorporator, has executed he following Articles of Incorporation thisday of, 19
CORPORATE NAME;
NEW Diagnostic Management, Inc.
BY: Nate Holland
STATE OF FLORIDA )
OUNTY OF Browdard
BEFORE ME, a Notary Public, personally appeared  ATE HOLOUGE  the President of  USA DIAGNOSTICS, FOC.  to be known to be the corporation described as Incorporator and the person who executed the foregoing Articles of Incorporation, and acknowledged before me that he or she subscribed to these Articles of Incorporation.
WITNESS my hand and official seal at
Browned, Florida, this 10th day of
JAnuary, 1999.
NOTARY PUBLIC
STATE OF FLORIDA at LARGE

My commission expires: 1-29-2000



## CERTIFICATE DESIGNATING PLACE OF BUSINESS DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

Pursuant to Sections 48.091 and 607.034, Florida Statues, the following is submitted, in compliance with said Sections:

That Diagnostic Management, Inc.

desiring to organize under the laws of the State of Florida has named Hollander as its agent to accept service of process within this state.

Nate

## ACKNOWLEDGMENT:

Having been named to accept service of process for the above, stated Corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and agree to comply with the provisions of said act relative to keeping open said office.

Dated this 1/10/9 day of \_\_\_\_\_, 19\_\_\_\_

Name: // 27

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SECRETARY OF STATE
TALLAHASSEF F. TOBIK