## PARAMITTALLET BUSSE

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

Tallahassee, FL 3	2314		÷	
SUBJECT:	Olympic Diagnostic (Proposed corpora	Specialty, Inc. te name - must include suf		
		, <b>4</b> !	0002809 -03717/990 ****122,50	1 4 4 1 1060006 *****78.75
Enclosed is an orig	ginal and one(1) copy of the articles	of incorporation and a	check for:	
☐ \$70.00 Filing Fee		\$122.50 Filing Fee & Certified Copy  ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate  PY REQUIRED	
FROM:	Yvette Lopez	·	<u>. =</u>	
	Name (Printed or typed)			
_	2721 West 55 Plac			DIVIG
_	Hialeah Gardens, City, State &	FL 33016	99 MAR	FILED FILED SION OF CORPOR
	305-389-8885	•	-	` ≥⋝

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

Daytime Telephone number

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## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the  $\overline{F}$ lorida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Olympic Diagnostic Specialty, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2721 West 55 Place Hialeah Gardens, Fl 33016 SECRETARY OF STATE ON DIVISION OF CORPORATIONS
99 MAR 17 PM 12: 14

ARTICLE III SHARES

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

1000 Shares Common Stock NPV

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Yvette Lopez 2721 West 55 Place Hialeah Gardens, FL 33016

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Yvette Lopez, President, Director and Secretary 2721 West 55 Place Hialeah Gardens, FL 33016

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 Olympic Diagnostic Specialty	, Inc.	<del></del> .
2.	The name and address of the registered agent and office is:	<u>=</u> 	SECRETA DIVISION OF
	Yvette Lopez (NAME)	<u></u>	F CON
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	 	PH 12: 14
	Hialeah Gardens, FL 33016 (CITY/STATE/ZIP)	<u>-</u>	

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) 3 10 99 - (DATE) =