

P99000071660

TRANSMITTAL LETTER

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

000002952450--1
-08/06/99-01044-018
*****78.75 *****78.75

SUBJECT: Mobile Health Diagnostics, 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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Alfred Otero
Name (Printed or typed)

10914 NW 32nd Place
Address

Gainesville, FL 32606
City, State & Zip

352-331-0477
Daytime Telephone number

99 AUG -6 AM 8:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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

8-12-99
2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of incorporation..

ARTICLE I NAME

The name of the corporation shall be:

MOBILE HEALTH DIAGNOSTICS, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10914 N.W. 32nd place, Gainesville, Fl. 32606

ARTICLE III SHARES

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

(3000) Three Thousand shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


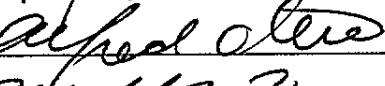

The name and Florida street of the address of the initial registered agent are:

Anthony R. Lambert,
17090, 55th place, McAlpin, Fl. 32062

ARTICLE V INCORPORATOR

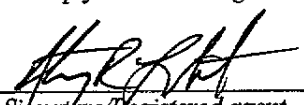
The name and address of the incorporator to these Articles of Incorporation are:

- 1.) Anthony R. Lambert; 17090, 55th place, McAlpin, Fl. 32062
- 2.) Alfred Otero; 10914, n.w., 32nd, place, Gainesville, Fl. 32606
- 3.) Michael W. Heppner; P.O. box-33, Hwy 127 N, Sanderson, Fl. 32087

1.) <u></u>	<u>8/4/99</u>
2.) <u></u>	<u>8/4/99</u>
3.) <u></u>	<u>8/4/99</u>
Signatures/Incorporators	Date

(An additional article must be added if an effective date is requested.)

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 obligations of my position as registered agent.

<u></u>	<u>8/4/99</u>
Signature/Registered agent	Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA