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Transmittal Letter

Department of State
Divisions of Corporations
PO Box 6327
Tallahassee FL 23214

Street Address:

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399
850-487-6052

Subject: CyberMedical Diagnostic Systems of Florida, 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 and Certificate of Status
- ☒ \$78.75 Filing Fee and Certified Copy
- ☐ \$87.50 Filing Fee, Certified Copy and Certificate of Status

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*****78.75 *****78.75

From:

Roland C. Ashby, Sr.
1213 16th Street North
St. Petersburg, FL 33705
727-502-0202

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. GALLON CASE SEP 13 1999

Articles of Incorporation.

of

CyberMedical Diagnostic Systems of Florida, Inc.

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

Article One - Name of Corporation

The name of the corporation is CyberMedical Diagnostic Systems of Florida, Inc.

Article Two - Principal Office

The principal place of business and mailing address of this corporation shall be 1213 16th Street North, St. Petersburg, FL 33705.

Article Three - Shares

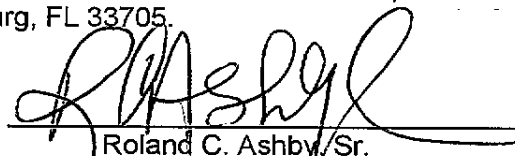
The number of shares of stock that this corporation is authorized to have outstanding at any one time is Seven-hundred Fifty (750) shares.

Article Four - Initial Registered Agent

The name and Florida street address of the initial registered agent are Roland C. Ashby, Sr., 1213 16th Street North, St. Petersburg, FL 33705.

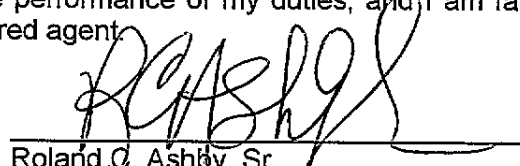
Article Five - Incorporator

The name and address of the incorporator to these Articles of Incorporation are Roland C. Ashby, Sr., 1213 16th Street North, St. Petersburg, FL 33705.


_____, Incorporator
Roland C. Ashby, Sr.

Date: September 3, 1999

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 of 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.


_____, Registered Agent
Roland C. Ashby, Sr.

Date: September 3, 1999

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