

TRANSMITTAL LETTER
P00000040155

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

SUBJECT: Aspire Medical Billing Service Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003218913--3
-04/21/00--01079--015
****175.00 *****87.50

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: Crystal L. White
Name (Printed or typed)

1591 S. Lane Ave
Address

Jacksonville Florida 32210
City, State & Zip

904-786-1119
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 21 PM 1:13

APPROVED
AND
FILED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 APR 21 PM 1:03

RECEIVED

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Aspire Medical Billing Service Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1591 S. Lane Ave
Jacksonville, Florida 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Claims Billing
Customer Service

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares @ 1st value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Crystal J. White Vice President / Secretary
1591 S. Lane Ave
Jacksonville, Florida 32210

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Daryl Burks
4444 S. Rio Grand
Orlando Florida 32839

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Crystal J. White
1591 S. Lane Ave
Jacksonville, Florida 32210

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Daryl Burks
Signature/Registered Agent

April 21, 2000
Date

Crystal J. White
Signature/Incorporator

April 21, 2000
Date

APPROVED
AND
FILED

00 APR 21 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA