# Electronic Articles of Organization For Florida Limited Liability Company

L06000005629 FILED 8:00 AM January 18, 2006 Sec. Of State Irivers

## **Article I**

The name of the Limited Liability Company is: ALPHA MEDICAL BILLING SOLUTIONS LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

2107 MARK DRIVE LAKE WORTH, FL. 33461

The mailing address of the Limited Liability Company is:

C/O CINDY BOWLING P.O. BOX 221461 WEST PALM BEACH, FL. 33422

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

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

CINDY BOWLING 2107 MARK DRIVE LAKE WORTH, FL. 33461

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Registered Agent Signature: CINDY BOWLING

# **Article V**

The name and address of managing members/managers are:

Title: MGRM CINDY BOWLING 2107 MARK DRIVE LAKE WORTH, FL. 33461

Title: MGRM ROBIN BIKOWICZ 693 HARTH DRIVE WEST PALM BEACH, FL. 33415

Signature of member or an authorized representative of a member

Signature: CINDY BOWLING

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