

L06000/17846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

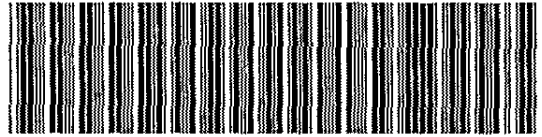
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**AL**

Office Use Only



000082829560

01/09/07--01026--008 \*\*25.00

2007 JAN 10 A 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JAS Billing Socialists, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suhail Seth, Esq.

(Name of Person)

Epstein Becker & Green, P.C.

(Firm/Company)

945 East Paces Ferry Road, Suite 2700

(Address)

Atlanta, Georgia 30326

(City/State and Zip Code)

For further information concerning this matter, please call:

Suhail Seth, Esq.

(Name of Person)

at ( 404 ) 869-5318

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

2001 JAN 10 A 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

**FIRST:**     The name of the limited liability company is:  
JAS Billing Socialists, LLC

**SECOND:**    The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
The incorrect statement is, "The name of the limited liability company is JAS Billing Socialists, LLC."

The reason for the incorrect statement is that the name of the company was misspelled.

The correct statement is, "The name of the limited liability company is JAS Billing Specialists, LLC."

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

**FILED**  
2007 JAN 10 A 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated: January 2, 2007

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Suhail Seth, Esq.

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee:           \$25.00**  
**Certified Copy:     \$30.00 (optional)**

Electronic Articles of Organization  
For  
Florida Limited Liability Company

L06000117846  
FILED 8:00 AM  
December 11, 2006  
Sec. Of State  
tcline

Article I

The name of the Limited Liability Company is:

JAS BILLING SPECIALISTS, LLC

Article II

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

1052 NW 134 PL  
MIAMI, FL. 33182

The mailing address of the Limited Liability Company is:

1052 NW 134 PL  
MIAMI, FL. 33182

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:

JOHN MEJIA  
3335 SW 99 CT  
MIAMI, FL. 33165

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: JOHN MEJIA