FILING SERVICE, INC ESS CORPOR

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 112

(Address)

CORAL GABLES, FL 33134 (305)444-4994

(City, State, Zip)

(Phone #)

OFFICE	USE	ONLY	

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1.	Southern Win (Corporation Name)	ds Medical Billing Co	Δ .
2.	(Corporation Name)	(Document #)	FEB 2
3.	(Corporation Name)	(Document #)	
4.	(Corporation Name)	(Document #)	CORATE 45
	Walk in Pick up time	Certified Copy)A
	Mail out Will wait	Photocopy Certificate of Sta	atus
1	NEW FILINGS	AMENDMENTS SOL	00031458331 -02/24/0001032009 *****78.75 *****78.75
	Profit	Amendment	
	NonProfit	Resignation of R.A., Officer/Director	
	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	
	Other	Merger	

OTHER FILNGS				
	Annual Report			
	Fictitious Name			
	Name Reservation			

REGISTRATION/ QUALIFICATION	
Foreign	l.
 Limited Partnership	
 Reinstatement	
Trademark	
Other	

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Examiner's Initials

ARTICLES OF INCORPORATION

OF.

SOUTHERN WINDS MEDICAL BILLING CORP.

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:

SOUTHERN WINDS MEDICAL BILLING CORP.

ARTICLE II PRINCIPAL OFFICE

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

411 N.W. 59th AVE. MIAMI, FLORIDA 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100

ARTICLE IV REGISTERED AGENT

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

OLIVIA ALMANZA 411 N.W. 59th AVE. MIAMI, FLORIDA 33126

ARTICLE V INCORPORATOR

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation are:

OLIVIA ALMANZA 411 N.W. 59th AVE. MIAMI, FLORIDA 33126 Signature of Incorporator

Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the director(s)/officer(s) to these Articles of Incorporation are:

OLIVIA ALMANZA (P/S/T) MATILDE CRUZ (VP) 411 N.W. 59th AVE. MIAMI, FL 33126

Having been named as registered and to accept service of process for the above started corporation at the place designated in this certificate, I hereby accept the appointment as registered agent an 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.

Signature of Registered Agent

Date

