PHODOS 39846

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

727-363-3931

Street Address:

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

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Subject:	AmeriCare Billing Service, 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	
□ \$ ¹	87.50 Filing Fee, Certified Copy and Certificate of Status	
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From:	~ . <u>_</u>	00 APR I
Roland C. Ashby, Sr.		SEY 7
125 110th Avenue, Ste 3		
Treasure Island, FL 33706		

Articles of Incorporation

of

AmeriCare Billing Service, Inc.

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SECRETARY UF STATE

TALLAHASSEE, FLORIDA

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 AmeriCare Billing Service, Inc.

Article Two - Principal Office

The principal place of business and mailing address of this corporation shall be 125 110th Avenue, Suite 3, Treasure Island, FL 33706

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., 125 110th Avenue, Suite 3, Treasure Island, FL 33706

Article Five - Incorporator

The name and address of the incorporator to these Articles of Incorporation are Roland C. Ashby, Sr., 125 110th Avenue, Suite 3, Treasure Island, FL 33**7**06.

Roland C. Ashby, S

, Incorporator

Registered Agent

Date: April 12, 2000

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. Λ

and C Ashby Sr

Date: April 12, 2000