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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FILED
00 APR 25 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

A DOCTORS CHOICE BILLING SERVICE, INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

OF

A DOCTORS CHOICE BILLING SERVICE, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A DOCTORS CHOICE BILLING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

**14388 S.W. 165 STREET
MIAMI, FLORIDA 33177**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name of the initial registered agent is :

**MILAY GONZALEZ
14388 S.W. 165 STREET
MIAMI, FLORIDA 33177**

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MIAMI, FLORIDA

ARTICLE V INCORPORATOR(S)

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



PRESIDENT

MILAY GONZALEZ
14388 S.W. 165 STREET
MIAMI, FLORIDA 33177

VICE-PRESIDENT

RICHARD GONZALEZ
14388 S.W. 165 STREET
MIAMI, FLORIDA 33177

The undersigned incorporator(s) has(have) executed these Articles of Incorporation
this 20 Day of APRIL 2000.


Signature

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

A DOCTORS CHOICE BILLING SERVICE, INC.

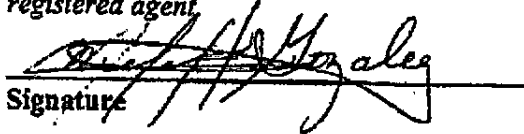
2. The name and address of the registered agent and office is:

MILAY GONZALEZ
14388 S.W. 165 STREET
MIAMI, FLORIDA 33177

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TALLAHASSEE, FLORIDA

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 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.

Signature



14388 SW 165 St.
Miami, FL 33177