# Pado O CO S 56 606

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

\$70.00

Filing Fee

\$78.75

Filing Fee

& Certificate of Status

400003276704--4 -06/05/00--01092--008 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

**\$87.50** 

Filing Fee,

Certified Copy

SUBJECT: PHYSICIANS CHOICE MEDICAL BILLING NETWORK, TAG

**□** \$78.75

Filing Fee

& Certified Copy

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

	& Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: LUIS O. GARCUA  Name (Printed or typed)  2751 NW 16 TERR  Address		00 JUN -5	7
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NOTE: Please provide the original and one copy of the articles.

### ARTICLE OF INCORPORATION

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## PHYSICIANS CHOICE MEDICAL BILLING NETWORKS INC. TAKE UF STATE TALLAHASSEE, FLORIDA

#### ARTICLE I: NAME

The name of this corporation is **PHYSICIANS CHOICE MEDICAL BILLING NETWORK, INC.** The mailing address of the corporation is 2751 NW 16<sup>TH</sup> TERR, MIAMI, FL 33125

#### ARTICLE II: DURATION

This corporation shall have perpetual existence.

#### ARTICLE III: PURPOSE

This corporation is organized to transact any lawful business for which corporations may be incorporated under the Florida General Corporation Act and for the purpose of manufacturing, purchasing or otherwise acquiring, and to own, mortgage, pledge, sell, assign, transfer, or otherwise dispose of, and to invest in, trade in, deal in and with goods, wares, merchandise, real and personal property and services of every class, kind and description; and to carry on any business which can be advantageously pursed in conjunction with or incidental to any of the above purpose.

#### ARTICL IV: CAPITAL STOCK

This corporation is authorized to issue Ten Thousand (10,000) shares of one cent (\$.01) par value common stock, which shall be, designated "Common Shares."

#### ARTICLE V: PRE-EMPTIVE RIGHTS

Every share holder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

#### ARTICLE VI: INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 2751 NW 16<sup>TH</sup> TERR, MIAMI, FL 33125, and the name of the initial registered agent of this corporation LUIS O. GARCIA.

#### ARTICLE VII: INITAIL BOARD OF DIRECTORS

This corporation shall have two directors initially. The number of directors may be either increased or diminished from time to time by the by-laws but shall never be less than one. The name and address of the initial directors of this corporation are:

- 1. MAURA C. GARCIA 2751 NW 16<sup>TH</sup> TERR MIAMI, FL 33125
- 2. LUIS O. GARCIA 2751 NW  $16^{TH}$  TERR MIAMI, FL 33125

#### ARTICLE VIII: INCORPORATOR

The name and address of the person signing these Articles is:

LUIS O. GARCIA

2751 NW 16<sup>TH</sup> TERR MIAMI, FL 33125

#### ARTICLE IX: INDEMNIFICATION

This corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

#### ARTICLE X: AMENDEMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation the 31 day of MAY, 2000.

#### STATE OF FLORIDA COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before an officer duly authorized in the county and state aforesaid to take acknowledgments, personally appeared LUIS O. GARCIA, who is personally know to me to be the person described in, who executed the foregoing Articles of Incorporation and who took an oath and acknowledgment before me that he executed those Articles of Incorporation.

WITNESS my hand and official seal in the county and state last aforesaid the 31, day of MAY, 2000.

otary Public of Florida



#### REGISTERED AGENT CERTIFICATE

In pursuance of Chapters 48.091 and 607.0501, Florida Statues, the following is submitted:

That PHYSICIANS CHOICE MEDICAL BILLING NETWORK, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principle place of business in the City of Fort Lauderdale, State of Florida, as named LUIS O. GARCIA 2751 NW 16<sup>TH</sup> TERR MIAMI, FL 33125, as its agent to accept service of process within the State of Florida.

Name of Person

Dated <u>5/3//2000</u>

Having been named to accept service of process for the above stated corporation at the place designated in this Certificate, I hereby acknowledge that I am familiar and accept the obligations of registered agent.

Name of Person Registered Agent

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