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Florida Department of State
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

FLORIDA PROFIT CORPORATION OR P.A.

HEALTH TECH CODERS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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The undersigned, incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation:

The name of the corporation is HEALTH TECH CODERS, INC., hereinafter referred to as the "Corporation".

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ARTICLE IX: INCORPORATOR

The incorporator of the Corporation is as follows:

SHERONES FRANKLIN COOK

IN WITNESS WHEREOF, I, Sherones Franklin Cook, the undersigned incorporator, have signed these Articles of Incorporation on this 17th day of August, 2000, and acknowledged the same to be my act.

Sherones Franklin Cook
SHERONES FRANKLIN COOK

STATE OF FLORIDA)

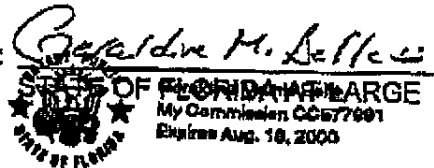
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 17th day of August, 2000, by Sherones Franklin Cook, who personally appeared before me at the time of notarization, and who is personally known to me or who produced a FLORIDA DRIVER'S LICENSE as identification.

NOTARY PUBLIC:

SIGN: Geraldine M. DeLore

PRINT: Geraldine M. DeLore



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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of Chapters 48.091 and 607.0501 of the Florida Statutes, the following is submitted, in compliance with said Acts:

First—That HEALTH TECH CODERS, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at City of MIAMI, County of MIAMI-DADE, State of Florida, has named Sherones Franklin Cook, at ,1800 N. W. 1st Avenue, in the City of MIAMI, County of MIAMI-DADE, State of Florida, as its agent to accept service of process within this state.

-Acceptance of Agent-

ACKNOWLEDGMENT:

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.

BY: Sherones Franklin Cook
SHERONES FRANKLIN COOK

DATE: 8/17/00

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