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Florida Department of State
Division of Corporations
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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

FLORIDA PROFIT CORPORATION OR P.A.

SUPERIOR MEDICAL BILLING & CONSULTING, INC.

Certificate of Status	0
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00 DEC 22 PM 12:38

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. McKnight DEC 22 2000

ARTICLES OF INCORPORATION
OF
SUPERIOR MEDICAL BILLING & CONSULTING, 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:

SUPERIOR MEDICAL BILLING & CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

8210 BYRON AVENUE, SUITE #25
MIAMI BEACH, FL 33141

ARTICLE III CAPITAL STOCK

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

FIVE (\$00) HUNDRED SHARES @ \$1.00/PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

IVIS VALDES
8210 BYRON AVENUE, SUITE #25
MIAMI BEACH, FL 33141

PREPARED BY: QUALITY ACCOUNTING & GENERAL SERVICES CORP.
6555 N.W. 36th STREET, SUITE 328
VIRGINIA GARDEN'S, FL 33166-6975
(305) 870-9670

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ARTICLE V INCORPORATOR(S)

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

**ARSENIO VEGA
8210 BYRON AVENUE, SUITE #25
MIAMI BEACH, FL 33141
D/P/VP/T/S**

The undersigned has(have) executed these Articles of Incorporation this 17th day
of DECEMBER, 2000.



ARSENIO VEGA - D/P/VP/T/S

Signature/Title

Signature/Title

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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 this corporation is:
SUPERIOR MEDICAL BILLING & CONSULTING, INC.

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

(NAME)

8210 BYRON AVENUE, SUITE #25

(P.O. BOX NOT ACCEPTABLE)
MIAMI BEACH, FL 33141

(CITY/STATE/ZIP)

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

DATE

Ivis Valdes
12/17/00

PREPARED BY: QUALITY ACCOUNTING & GENERAL SERVICES CORP.
6855 N.W. 36TH STREET, SUITE 328
VIRGINIA GARDENS, FL 33146-6975
(305) 870-9670

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