6100000142

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

Gentlemen:

*****70.00 *****70.00

Enclosed please find our check in the amount of \$70.00 to cover Corporation charges for Automated Billing Center, Inc Shavonne M. Steding, Registered Agent.

Very Truly Yours.

Shavonne Steding,

Automated Billing Center, Inc.

Shaverne M. Stederg

ARTICLES OF INCORPORATION AUTOMATED BILLING CENTER INC.

FILED

OI JAN -8 AM 10: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Article of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be Automated Billing Center Inc.

The principal place of business of this corporation shall be 5850 Lakehurst Drive, Suite 210 Orlando, Florida 32819.

ARTICLE II NATURE OF BUSINESS.

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK.

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is 1000 shares at \$1.00 per share.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

The names and street addresses of the initial officers and directors who shall hold offices and first year of the corporation's existence or until their successor is elected, are:

Shavonne M. Steding, 5850 Lakehurst Drive Suite 210 Orlando FL 32819.

ARTICLE VI INCORPORATOR.

The name and street address of the incorporator to this articles of incorporation is:	
Shavonne M. Steding 5850 Lakehurst Drive Suite 210	-
Orlando FL 32819	
IN WITNESS WHEREOF, the undersigned incorporator has executed these. Article of Incorporation this day of, 2001	
	Signature of Incorporator.
	Shavenno M. Steding
STATE OF FLORIDA COUNTY OF ORANGE	
THE FOREGOING instrument was acknowledged and sworn to before me this day of, 2001. by Shavonne M. Steding, Automated Billing Center Inc.	

Notary Public

KAREN WEST

MY COMMISSION # CC976774

EXPIRES: Oct 22, 2004

1-8003-NOTARY FL Notary Service & Bonding, Inc.

My Commission Expires: 10/22/04

CERTIFICATE DESIGNATING REGISTERED AGENT\REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 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 AUTOMATED BILLING CENTER INC.
- 2. The name and address of the registered agent and office is Shavonne M. Steding, 5850 Lakehurst Drive Suite 210, Orlando FL 32819.

Signature. Showome M. Steding

Title: Registered Agent

Date: /-4-0/

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES...

Signature: Showard M. Steding

(Registered Agent)

Date: 1-4-01

FILED

SECRETARY OF STATE A