

PO1000010816

TRANSMITTAL LETTER

FILED

01 JAN 29 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

100003589891--4

-01/29/01--01086--005

*****78.75 *****78.75

SUBJECT: Advanced Billing Services, Inc. ^{OF MIAMI}
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Alexandra Turnbull
Name (printed or typed)

10540 SW 154th #3
Address

Miami, Florida 33196
City, State & Zip

Alexandra Turnbull GAVE

AUTHORIZATION BY PHONE IN

305-387-5535
Daytime Telephone number

CERTIFICATE new transmittal/w/

DATE new corp name

DOC. EXAM CH 1/30/01 ✓

NOTE: Please provide the original and one copy of the articles.

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 5327
Tallahassee, FL 32314

SUBJECT: Advanced Billing Services of Miami, Inc
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Alexandra turnbull
Name (printed or typed)

10540 SW 154 Ct #3
Address

Miami, FL 33196
City, State & Zip

305-387-5535
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

FILED

01 JAN 29 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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:

Advanced Billing Services of Miami, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10540 S.W. 154 Ct. #3
Miami, Florida 33196

ARTICLE III SHARES

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

100 shares of \$10.00 each Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Grace Bustamante
11386 SW 116 Terr. Road.
Miami, Florida. 33176

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

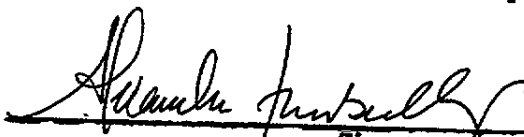
Alexandra Turnbull
President
10540 SW 154 Ct #3
Miami, Florida 33196

Roberto F. JARRO
Vice-President
10540 SW 154 Ct #3
Miami, Florida 33196

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26th day of JANUARY, 2001.

(An additional article must be added if an effective date is requested.)


Signature


Signature


Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

FILED

01 JAN 29 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: ADVANCED BILLING SERVICES OF MIAMI, INC.

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

GRACE BUSTAMANTE
(NAME)

11386 SW 116 TERR ROAD.
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI, FLORIDA 33176
(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.

Grace Bustamante
(SIGNATURE)

01-26-01
(DATE)