

TRANSMISSION LETTER
PO1000015259

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

200003662142-1
-02/08/01-01094-016
*****78.75 *****78.75

SUBJECT: C.C. Physician Billing Service Corp.

(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 \$78.75
Filing Fee Filing Fee
& Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of & Certificate of
Status Status

ADDITIONAL COPY REQUIRED

FROM: Javier Villasante

Name (Printed or typed)

7403 SW 82 ST apt 111N

Address

Miami, FL, 33143

City, State & Zip

(305)662-1329

Daytime Telephone number

01 FEB -8 AM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

2-9-01
REC

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

C.C. Physician Billing Service Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Javier Villasante
P.O. Box 558201
Miami, FL, 33255

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Physician billing service.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Javier Villasante (President)
7403 SW 82 ST apt 111N Miami, FL, 33143
Heidy Villasante (Vice-president)
7403 SW 82 ST apt 111N Miami, FL, 33143

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Javier Villasante
7403 SW 82 ST apt 111N Miami, FL, 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Javier Villasante
7403 SW 82 ST apt 111N Miami, FL, 33143

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Javier Villasante

Signature/Registered Agent

2/7/01

Date

Javier Villasante

Signature/Incorporator

2/7/01

Date

01 FEB -01 AM 11:14
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA