

TRANSMITTAL LETTER

P01000031062

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

FILED  
01 MAR 22 AM 11:41  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: RN Medical Billing and Associates, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900003892799--3  
-03/22/01--01066--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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 of Status

☐ \$78.75 Filing Fee & Certified Copy  
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status  
ADDITIONAL COPY REQUIRED

FROM: Robin-L. Nutter  
Name (Printed or typed)

540 NW 4th Ave #3402  
Address

Ft. Lauderdale FL 33311  
City, State & Zip

(954) 846-8099 ext. 1258  
Daytime Telephone number

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

Robin-L. Nutter GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Part IV & VII  
DATE 3/30/01  
DOC. EXAM Chris Brown

D. BROWN MAR 27 2001

# 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:

RN Medical Billing and Associates Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

540 NW 4th Ave #3402  
Ft. Lauderdale, FL 33311

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

## ARTICLE IV SHARES

The number of shares of stock is:

50

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

N/A

## ARTICLE VI REGISTERED AGENT

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

Robin L. Nutter  
540 NW 4th Ave, #3402  
Ft. Lauderdale, FL 33311

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robin L. Nutter  
540 NW 4th Ave #3402  
Ft. Lauderdale, FL 33311

\*\*\*\*\*

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

Robin L. Nutter

Signature/Incorporator / Registered Agent

3/18/01

Date

FILED  
01 MAR 22 AM 11:42  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA