

TRANSMITTAL LETTER

P010000043116

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

SUBJECT: BILLING DEPOT INCORPORATED
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004082101--8
-04/26/01--01095--019
*****78.75 *****78.75

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: SANDY WASHBURN
Name (Printed or typed)

8490 NW 16 St.

Address

PEMBROKE PINES, FL 33024

City, State & Zip

305-891-0050 EXT 2224

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FL 32304

01 APR 26 PM 12:53

FILED

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

T. Burch APR 30 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:

BILLING DEPOT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8490 NW 16 St.
Pembroke Pines, FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL BILLING

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

President MARNI FARBER 10801 NW 21 CT SUNRISE FL 33322
V P/Sec Sandy Washburn 8490 NW 16 St. PembrokE Pines FL 33024
Treasurer Marlene OTERO 18151 NE 31 CT #1014 MIAMI FL 33160

ARTICLE VI REGISTERED AGENT

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

MARNI FARBER
10801 NW 21 COURT
SUNRISE, FL 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SANDY WASHBURN
8490 NW 16 St.
PEMBROKE PINES, FL 33024

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

Signature/Registered Agent

Marni Farber

Signature/Incorporator

Date

Date

FILED
01 APR 26 PM 12:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA