

OFFICE USE ONLY (Document)

P100078439

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

400004526914--5

-08/09/01--01047--005

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

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. OPTIMAL BILLING SYSTEMS, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

01 AUG -9 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION
OF
OPTIMAL BILLING SYSTEMS, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- I – NAME: The name of this corporation is: OPTIMAL BILLING SYSTEMS, INC.
- II – DURATION: This corporation shall have perpetual existence, unless sooner
-dissolved in accordance with the laws of the State of Florida.
- III – PURPOSE: This corporation is organized for the purpose of transacting any and all
-business permitted under the laws of the United States of the State of Florida.
- IV – CAPITAL STOCK: This corporation is authorized to issue –ONE HUNDRED –
(100) shares of –NO -- par value common stock, which shall be designated
“Common Stock”.
- V – PREEMPTIVE RIGHTS: Every shareholder, upon the sale for cash of any new stock
-of this corporation of the same kind, class or series as that which he already holds,
-shall have the right to purchase his pro rata share thereof (as nearly as may be done
-without issuance of fractional shares) at the price at which it is offered to others.
- VI – INITIAL PRINCIPAL OFFICE, MAILING ADDRESS AND INITIAL
REGISTERED OFFICE AND AGENT:
- The street address of the initial principal and registered office of this corporation is:
- 980 E. 19TH STREET – HIALEAH, FL 33013
- and the name of the initial registered agent of this Corporation at the address is:
- ROSA SANCHEZ

VII – INITIAL BOARD OF DIRECTORS: The corporation shall have ~~ONE~~ (01)

-director(s) initially. The number of directors may be either increased or

-diminished from time to time by the bylaws but shall never be less than ONE (01).

The name(s) and address of the initial director(s) of this corporation is (are):

ROSA SANCHEZ 980 E. 19TH STREET - HIALEAH, FL 33013

ALEJANDRO BUSTOS 980 E. 19TH STREET - HIALEAH, FL 33013

VIII – INDEMNIFICATION: The Corporation shall indemnify any officer or director, or

-any former officer or director, to the full extent permitted by law.

IX – INCORPORATOR: The name(s) and address of the person(s) signing these articles

-is (are):

ROSA SANCHEZ. 980 E. 19TH STREET – HIALEAH, FL 33013

ALEJANDRO BUSTOS 980 E. 19TH STREET – HIALEAH, FL 33013

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have) executed the articles

Of incorporation this 1st day of AUGUST , 2001.

> Raul J. Sanchez
> [Signature]

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT
UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE.

In compliance with Section 607.034 of the Florida Statutes, the following is submitted:

OPTIMAL BILLING SYSTEMS, INC.


desiring to organize or qualify under the laws of the State of Florida, with its principal
- place of business in the City of - MIAMI --, county of - MIAMI-DADE --, State of
Florida, has named: ROSA SANCHEZ ---- located at:

980 E. 19TH STREET - HIALEAH, FL 33033

City of - MIAMI --, County of - MIAMI-DADE --, State of Florida, as its agent to
accept services of process within the State of Florida.

ACKNOWLEDGEMENT: Having been named to accept service of process for the above
mentioned Corporation, at the place designated in this Certificate, I hereby agree to act in
his capacity, and further agree to comply with the provisions of all statutes relative to the
proper and complete performance of my duties.

Dated this - 1st. -- day of -- AUGUST -- , 2001.

> 
Resident and registered agent
Rosa Sanchez

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SECRETARY OF STATE
TALLAHASSEE FLORIDA