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**LAZARUS CORPORATE FILING SERVICE**  
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**TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)**

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**RECEIVED**  
 01 OCT -5 AM 11:13  
 DIVISION OF CORPORATION

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

1. ULTIMATE MEDICAL BILLING, INC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in   
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  Certified Copy  
 Mail out   
  Will wait   
  Photocopy   
  Certificate of Status

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

*[Handwritten Signature]*

Examiner's Initials

**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:*

ULTIMATE MEDICAL BILLING, INC.

**ARTICLE II - PRINCIPAL OFFICE**

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

615 WEST PARK DRIVE, # 205  
MIAMI, FL 33172

**ARTICLE III - SHARES**

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

100

**ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and address of the initial registered agent is:*

MARIA PAZ 615 WEST PARK DRIVE, # 205  
MIAMI, FL 33172

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

MARIA PAZ 615 WEST PARK DRIVE, # 205 MIAMI, FL 33172  
MARITZA NAVARRO 14519 SW 96 TERRACE Miami, FL 33186

The undersigned incorporator has executed these Articles of Incorporation this 1<sup>st</sup> day of October 2001

Maria R. Paz  
Signature

ARTICLE VI- DIRECTOR(S)

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

MARIA PAZ 615 WEST PARK DRIVE, # 205 MIAMI, FL 33172 (PRESIDENT)  
MARITZA NAVARRO 14519 SW 96 TERRACE MIAMI, FL 33186 (VICE\_PRESIDENT)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Maria R. Paz  
Registered Agent Signature

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