

OFFICE USE ONLY (DOCUMENT #)

# P01000108717

## LAZARUS CORPORATE FILING SERVICE

3320 W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. XPRESS BILLING & CONSULTING SERVICES 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

RECEIVED  
01 NOV 13 AM 10:32  
01 NOV 13 PM 1:24  
DEPARTMENT OF STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATE REGISTRATION  
TALLAHASSEE, FLORIDA

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

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-11/13/01--01036--021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Examiner's Initials

# ARTICLES OF INCORPORATION

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

## FIRST

The name of the corporation is:

**Xpress Billing & Consulting Services Inc.**

## SECOND

The period of its duration is:

**Perpetual**

## THIRD

The purpose of the corporation is:

**Consulting Service**

## FOURTH

The aggregate number of authorized shares is: **100**

## FIFTH

The corporation will not commence business until at least December 1st 2001 dollars have been received by it as consideration for the issuance of shares.

## SIXTH

Cumulative voting of shares of stock 100 authorized.

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TALLAHASSEE FLORIDA

**SEVENTH**

The address of the initial registered office of the corporation is:

**6881 West 36th Ave # 102  
Hialeah Gardens  
Florida 33018**

and the name of its initial registered agent at such address is:

**ILEANA ARRANZ**

**EIGHTH**

Address of the principal place of business is:

**6881 West 36th Ave # 102  
Hialeah Gardens, Florida 33018**

**NINETH**

The number of directors constituting the initial board of directors of the corporation is 1, and the names and address of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and shall qualify are:

| Name              | Address                                                       |
|-------------------|---------------------------------------------------------------|
| ILEANA ARRANZ (P) | 6881 West 36th Ave # 102<br>Hialeah Gardens,<br>Florida 33018 |

**TENTH**

The name and address of each incorporator is:

| Name          | Address                                                          |
|---------------|------------------------------------------------------------------|
| ILEANA ARRANZ | 6881 West 36th Ave<br># 102<br>Hialeah Gardens,<br>Florida 33018 |

ELEVENTH

The name and address of the registered agent is:

Name

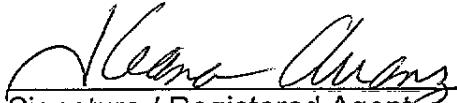
Address

ILEANA ARRANZ

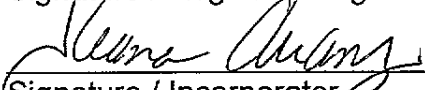
6881 West 36th Ave # 102  
Hialeah Gardens  
Florida 33018

.....

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

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature / Incorporator

\_\_\_\_\_  
Date

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