

PO1000116527

One Source Medical Billing Service, Inc.
Taralyn Munsell
P.O. Box 12117
Brooksville, FL 34603

Dec 02, 2001
August 10, 2001

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

900004714119--8
-12/07/01--01035--005
*****87.50 *****87.50

RE: One Source Medical Billing Service, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$87.50.

Sincerely, *Taralyn Munsell*

FILED
2001 DEC - 7 AM 10: 23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

sf 12/10/01

EFFECTIVE DATE

ARTICLES OF INCORPORATION

01/01/02

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

2001 DEC -7 AM 10: 23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - NAME

The name of the corporation shall be: One Source Medical Billing Service, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

P.O. Box 12117
Brooksville, FL 34603

ARTICLE III - SHARES

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

Two Hundred (200)

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Taralyn Munsell
11420 Kansas Road
Brooksville, FL 34603

FILED

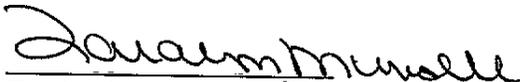
2001 DEC -7 AM 10: 23

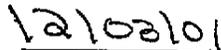
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE V - INCORPORATOR

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

Taralyn Munsell
11420 Kansas Road
Brooksville, FL 34603

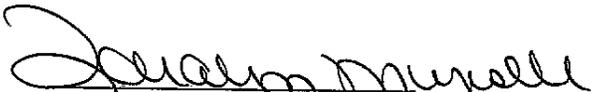

Taralyn Munsell


Date

ARTICLE VI - EFFECTIVE DATE

The requested effective date is: ~~September 1, 2001~~ ^{January 1} 2002

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


Taralyn Munsell


Date