

TRANSMITTAL LETTER

P010000119473

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

300004727633--9
-12/17/01--01021--003
*****70.00 *****70.00

SUBJECT: Prosperous Health Plus, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Jamie N. Johnson
Name (Printed or typed)

P.O. Box 40815
Address

Jacksonville, Fl. 32203
City, State & Zip

(904) 374-9353
Daytime Telephone number

01 DEC 17 PM 1:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

12-18-01
B

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: Prosperous Health Plus, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business address is: 6651 Crestline Drive Jacksonville, FL 32211

The mailing address is: P.O. Box 40815 Jacksonville, FL 32203

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Medical billing contracting company.
Assisting medical providers in both proper billing of patients and/or collections of debts.

ARTICLE IV SHARES

The number of shares of stock is: (1) One – which is owned 100% by Jamie N. Johnson.

ARTICLE V INITIAL OFFICERS/DIRECTORS

Jamie N. Johnson	President	3501 Townsend Blvd. #184	Jacksonville, FL 32277
Latanya M. Johnson	VP	3501 Townsend Blvd. #184	Jacksonville, FL 32277
Malcom L. Carter, Sr.	VP	355 W. 6 th Street	Jacksonville, FL 32206

ARTICLE VI REGISTERED AGENT

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

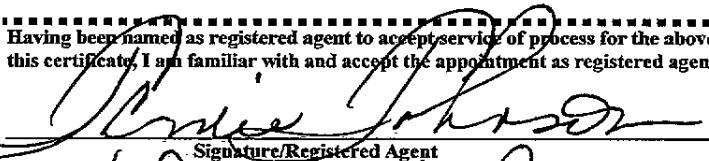
Jamie N. Johnson 3501 Townsend Blvd. #184 Jacksonville, FL 32277

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Latanya M. Johnson 3501 Townsend Blvd. #184 Jacksonville, FL 32277

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

12-13-01
Date


Signature/Incorporator

12-13-01
Date

FILED
01 DEC 17 PM 1:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA