PO200008100

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

400004781194--4-01/17/02--01023--024
*****87.50 ******87.50

SUBJECT: C.A.R. Professional Billing Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| ginal and one (1) copy of the arti | cles of incorporation and | d a check for: |
|--|--|---|
| \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| | | |
| | | |
| City, 5 | State & Zip | 2002 JAN 17 PM 1: 2 SECKETARY OF STAT TALLAHASSEE FLORI |
| | S78.75 Filing Fee & Certificate of Status Cecilia A. Rodriguez Name (11675 N.W. 90th Aver A Hialeah Gardens, FL. City, 5 (305) 401-4405 | Filing Fee & Certificate of Status ADDITIONAL CO Cecilia A. Rodriguez Name (Printed or typed) 11675 N.W. 90th Avenue Address Hialeah Gardens, FL. 33018 City, State & Zip |

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

Tilaloa

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2002 JAN 17 PM 1: 25

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Date

ARTICLE I NAME

The name of the corporation shall be:

C.A.R. Professional Billing Services, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11675 N.W. 90th Avenue Hialeah Gardens, FL. 33018

ARTICLE III _ PURPOSE

The purpose for which the corporation is organized is:

Professional Billing Services

ARTICLE IV _ SHARES

The number of shares of stock is: 100 Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

Cecilia A. Rodriguez 11675 N.W. 90th Avenue Hialeah Gardens, FL. 33018

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Signature/Registered Agent

Cecilia A. Rodriguez 11675 N.W. 90th Avenue Hialeah Gardens, FL. 33018

| ************************** | *********** | ****** |
|---|--------------------------------------|--------|
| Having been named as registered agent to accept service of process for the a certificate, I am familiar with and accept the appointment as registered agent | bove stated cornoration at the place | |
| (Ridmaines | Tanuary 15 | 20.65 |

mature/Acorporator January 15, 2002