

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN
PICK UP 4/8/02

☒ **CERTIFIED COPY** _____

CUS _____

PHOTO COPY _____

☒ **FILING** Profit

1.) East Coast Billing Solutions Inc.
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS _____

800005204628-3
-04/08/02--01031--002
*****78.75 *****78.75

RECEIVED
02 APR -8 AM 9:58
TALLAHASSEE FLORIDA

FILED
2002 APR -8 PM 12:55
TALLAHASSEE FLORIDA

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4/8/02

ARTICLES OF INCORPORATION

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

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2002 APR -8 PM 12:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA**ARTICLE I NAME**

The name of the corporation shall be:

East Coast Billing Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2263 West New Haven Ave
W. Melbourne FL 32904**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

(Jeffrey Tirico
2273 4th Ave
Vero Beach, FL 32962)**ARTICLE VI REGISTERED AGENT**

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

Jeffrey Tirico
2273 4th Ave
Vero Beach FL 32962**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Jeffrey Tirico
2273 4th Ave
Vero Beach, FL 32962*****
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

4-1-02

Signature/Incorporator

Date

4-1-02