

P02 000046334

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32310
02 APR 25 PM 12:57

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

SUBJECT: A.M.H. MEDICAL ADMINISTRATORS, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600005347786--9

-04/25/02--01042--003

*****78.75 *****78.75

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: Anita M. Hinds
Name (Printed or typed)

18290 SE. Ridgeview DR
Address

Tequesta FL 33469
City, State & Zip

561-262-5863
Daytime Telephone number

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

F. GHESSER

APR 29

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: AMH MEDICAL ADMINISTRATORS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 18290 SE RIDGEVIEW DR.
TEQUESTA, FL 33469

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: medical Bulling & Administration
consulting.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): ANITA M HINDS, PRESIDENT & CEO
18290 SE RIDGEVIEW DR
TEQUESTA, FL 33469

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 APR 25 PM 12:57

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: MARK D. HINDS
18290 SE RIDGEVIEW DR
TEQUESTA, FL 33469

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: ANITA M. HINDS
18290 SE RIDGEVIEW DR
TEQUESTA, FL 33469

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

4/16/02

4/15/02