

P02000086658


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

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8/12 

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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FILING Articles

1.) Promedco Group, Inc.  
(CORPORATE NAME & DOCUMENT #)

300007046812-4  
-08/12/02-01013-023  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

2.)  
(CORPORATE NAME & DOCUMENT #)

3.)  
(CORPORATE NAME & DOCUMENT #)

4.)  
(CORPORATE NAME & DOCUMENT #)

5.)  
(CORPORATE NAME & DOCUMENT #)

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DIVISION OF CORPORATION

SPECIAL INSTRUCTIONS



**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:

PROMENCO GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5055 CEDAR SPRINGS DR. NAPLES, FL. 34110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPREHENSIVE MEDICAL MANAGEMENT, BILLING AND CODING.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

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:

ROBERT ANTONSON  
5055 CEDAR SPRINGS DR. # 104  
NAPLES, FL. 34110

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT ANTONSON  
5055 CEDAR SPRINGS DR. # 104  
NAPLES, FL. 34110

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

Robert Antonson  
Signature/Registered Agent

Date 8/7/02

Robert Antonson  
Signature/Incorporator

Date 8/7/02

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