

TRANSMITTAL LETTER

FILED

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02 AUG 12 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDADepartment of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314800007047448--3
-08/12/02--01034--004
*****78.75 *****78.75SUBJECT: Suzy G. Mehle, INC.(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Susana G. Mehle

Name (Printed or typed)

14006 S.W. 48 TER

Address

Miami, FL 33175

City, State & Zip

305-273-4641 ext 115

Daytime Telephone number

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

8.14.02
PS
2

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Suzy G. Mehle INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14006 S.W. 48th Ave
Miami, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Practice Management and Medical Billing Consultant

ARTICLE IV SHARES

The number of shares of stock is:

1

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:

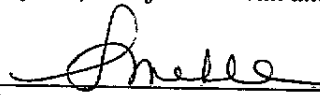
Susana Mehle
14006 SW 48th Ave
Miami, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Susana Mehle
14006 SW 48th Ave
Miami, FL 33175

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

8/4/02

Date



Signature/Incorporator

8/4/02

Date