

FILED

02 NOV 13 AM 9:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P02000121513

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H02000225560 0)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : CHEVOLO ACCOUNTING, INC.  
Account Number : I20000000167  
Phone : (954) 777-0082  
Fax Number : (954) 777-0062

FLORIDA PROFIT CORPORATION OR P.A.

ACE Medical Billing, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

OB 11/14

H02000225560 0

**ARTICLES OF INCORPORATION  
OF**

ACE Medical Billing, Inc.

In compliance with Chapter 607 and/or Chapter 621 Florida Statutes, the undersigned incorporates, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be: ACE Medical Billing, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The mailing address of this corporation shall be:  
3401 N W 38<sup>th</sup> Terrace, Lauderdale Lakes, Florida 33309

**ARTICLE III PURPOSE**

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, or nation.

**ARTICLE IV SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**TEN THOUSAND (10000) SHARES OF COMMON STOCK WITH A PAR  
VALUE OF ONE DOLLAR (\$1.00) PER SHARE.**

**ARTICLE V TERM OF EXISTANCE**

This corporation is to exist perpetually.

**ARTICLE VI INITIAL OFFICERS / DIRECTORS**

The name and street address of the initial officer and director is:  
Juliann Noble – 4301 N W 38<sup>th</sup> Terrace, Lauderdale Lakes, FL 33309  
President / Director/Treasury

FILED  
02 NOV 13 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H02000225560 0

**ARTICLE VII INCORPORATORS**

The name and address of the incorporator of these Articles of Incorporation is:  
Julian Noble - 4301 N W 38<sup>th</sup> Terrace, Lauderdale Lakes, FL 33309

IN WITNESS WHEREOF, The undersigned incorporator have executed these Articles of  
Incorporation this:

13 Day of NOVEMBER, 2002

Julian Noble

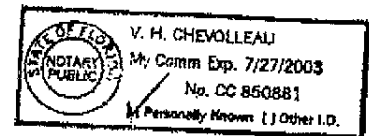
STATE OF FLORIDA  
COUNTY OF BROWARD

THE FOREGOING instrument was acknowledged and sworn before me this

13<sup>th</sup> day of Nov, 2002, by Ms. Julian Noble  
of ACE Medical Billing, Inc.

Notary Public

My Commission Expires



H02000225560 0

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

FILED  
02 NOV 13 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0501 of 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

The name of the corporation is: **ACE Medical Billing, Inc.**  
The name and address of the registered agent and officer is:

**Juliann Noble**

**4301 N W 38<sup>th</sup> Terrace, Landerdale Lakes, Fl 33309**

Having been named as registered agent and to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my position as registered agent.

SIGNATURE Juliann Noble DATE \_\_\_\_\_