P03000040439

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Ci	ty/State/Zip/Phone	• #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	•
Dertified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	,	
	Office Use On	lv



100014940031

04/04/03--01039--016 **78.75

04100)

TRANSMITTAL LETTER

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

SUBJECT:	CASTIE BILLIA		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Albert Sancher	Z (Printed or typed)	
	6337 Wedgew		
	Tamarac, FL 3	3332 [, State & Zip	
	305 - 629 - 3 Daytime	370 Telephone number	

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

ARTICLES OF INCORPORATION

Article I NAME

The name of the corporation shall be:

CASTLE BILLING, INC.

Article II PRINCIPAL OFFICE

The principal office place of business and mailing address of this corporation shall be:

6337 Wedgewood Terrace Tamarac, Florida 33321

Article III PURPOSE

The corporation may engage or transact in any or all lawful activities or business

permitted under the laws of the United States, the State of Florida or any other state,

country, territory or nation

Article IV SHARES

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

time is 1,000 shares. The par value of each share of stock is \$1.00.

Article V OFFICER / DIRECTOR

The initial director of the corporation is:

Albert Sanchez, 6337 Wedgewood Terrace, Tamarac 33321

Article VI REGISTERED AGENT

The name and Florida address of the registered agent is:

Albert Sanchez, 6337 Wedgewood Terrace, Tamarac, Florida 33321. Located in the

County of Broward.

Article VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Albert Sanchez, 6337 Wedgewood Terrace, Tamarac 33321

I hereby accept the appointment as registered agent and agree to act in this capacity.

Signature

Albert Sanchez

Date: 04/01/2003

Signature

Albert Sanchez, Incomorator

Date: 04/01/2003