

(Address) (Address) (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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114/04/03-01064-022 **87.50

FILED 03 JUN -2 AH 10: 50 SECRETARY (F

v.03-130

TRANSMITTAL LETTER

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

QX SUBJECT: (PROPOSED CORPORATE NAME

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

JW

□ \$70.00 Filing Fee

FROM:

\$78.75
Filing Fee
& Certificate of Status



L City, State & Zip

954 - 747-Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 6, 2003

YRIBEL FERREIRAS 7720 NW 50TH ST., APT. 206 LAUDERHILL, FL 33351

SUBJECT: JIREH MEDICAL BILLING SERVICE CO. Ref. Number: W03000013013

We have received your document for JIREH MEDICAL BILLING SERVICE CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

As per 607 of the Florida Statues there must be at least one share of stock listed in the articles. Please list the number of shares instead of the percentage of ownership.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum Document Specialist New Filings Section

Letter Number: 003A00027984

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: lical Billing Service I ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: ECTIN (M | X)street 720 ARTICLE III PURPOSE The purpose for which the corporation is organized is: service to all clients. tak medical billing provide. any other that is leadly ser Derm lina in the state onda. Ő SHARES ARTICLE IV The number shares of stock is: in all aspects of ature 100 Shares I dollar per share J INITIAL OFFICERS/DIRECTORS (optional) ARTICLE The name(s), address(es) and title(s): erreiras rsident Ferreiraslice-H ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: th HOT 206 Sampet der ARTICLE VII **INCORPORATOR** The name and address of the Incorporator is: 206 Eusebio ferreiras Street 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

Signature/Incorporator

Date