

P03000086162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

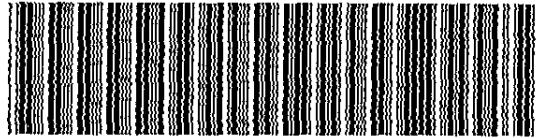
(Business Entity Name)

(Document Number)

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CLERK OF STATE  
CORPORATIONS  
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8-6-03  
WZ

## TRANSMITTAL LETTER

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

**SUBJECT:** COMPREHENSIVE HEALTH TRANSCRIPTION, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** CECILIO JACOBO

Name (Printed or typed)

13713 SW 9TH STREET

Address

MIAMI, FL 33184

City, State & Zip

305-553-3310

Daytime Telephone number

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

# ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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## ARTICLE I NAME

The name of the corporation shall be:  
COMPREHENSIVE HEALTH TRANSCRIPTION, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
13713 SW 9TH STREET, MIAMI, FL 33184

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
TRANSCRIPTION

## ARTICLE IV SHARES

The number of shares of stock is:  
100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):  
CECILIO JACOBO, PRESIDENTE  
13713 SW 9TH STREET  
MIAMI, FL 33184

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:  
MARIO HERNANDEZ  
5715 SW 4TH STREET  
MIAMI, FL 33144

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:  
CECILIO JACOBO  
13713 SW 9TH STREET  
MIAMI, FL 33184

\*\*\*\*\*

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

07/31/03

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator  
Cecilio Jacobo

07/31/03

\_\_\_\_\_  
Date