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| PICK-UP WAIT MAIL                       |  |
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| (Business Entity Name)                  |  |
| (Document Number)                       |  |
| (Socialistic Hallings)                  |  |
| Certified Copies Certificates of Status |  |
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| Special Instructions to Filing Officer: |  |
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| OFFICE USE ONLY(DOCUMENT # ) | , , , , , , , , , , , , , , , , , , , |
|------------------------------|---------------------------------------|
| LAZARUS CORPORATE FILIN      | G SERVICE                             |
| 3320 S.W. 87 AVENUE          |                                       |
| MIAMI, FLORIDA (305)552-5973 |                                       |
|                              |                                       |
|                              |                                       |
|                              | OFFICE USE ONLY                       |
|                              | CUMENT NUMBER(S) (if known):          |
|                              | LLING COMPANY                         |
| (Corporation Name)           | (Document #)                          |
| (Corporation Name)           | (Document #)                          |
| 3. (Corporation Name)        | (Document #)                          |
| 4.                           | (Bocdinara # )                        |
| (Corporation Name)           | (Document #)                          |
| Walk in Pick up time         | Z. \omega Certified Copy              |
| Mail out Will wait           | Photocopy Certificate of Status       |
| NEW FILINGS                  | AMENDMENTS                            |
| Profit                       | Amendment                             |
| NonProfit                    | Resignation of R.A., Officer/Director |
| . Limited Liability          | Change of Registered Agent            |
| Domestication                | Dissolution/Withdrawal                |
| Other                        | Merger                                |
| <u> </u>                     |                                       |
| OTHER FILINGS                | REGISTRATION/<br>QUALIFICATION        |
| Annual Report                | Foreign                               |
| Fictitious Name              | Limited Partnership                   |
| Name Reservation             | Reinstatement                         |

Trademark

Examiner's Initials

Other

## ARTICLES OF INCORPORATION

D3 SEP -9 PM 12: 1:

SECRETALLY OF STATE TALLAHASSEE, FLORID, Opt(s)

The undersigned Incorporator(s), for the purpose of forming a Corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of the corporation shall be:

Paradise Billing Company

#### ARTICLE II - PRINCIPAL OFFICE

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

6324 SW 151 Pl. Miami Fl. 33193

#### ARTICLE III -SHARES

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

100

#### ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Berta Bueno 6324 SW 151PC. WIAMI FL. 33193

#### ARTICLE V - INCORPORATOR

| The name and s   | treet | address | of the     | incorporator | to these | Articles of |
|------------------|-------|---------|------------|--------------|----------|-------------|
| Incornaration is |       |         | <i>'</i> 2 | •            |          | •           |

Berta Bueno. 6324 SW 151Pl. Wami Fl. 33193

The undersigned incorporator has executed these Articles of Incorporation this 8 day of 5ebf 2003

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):  $Oregin{align*} Oregin* & Oregin* &$ 

Berta Bueno 6324 SW 151PC. Mami FL. 33193

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

FILED PH 12: 1