

P03000119656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

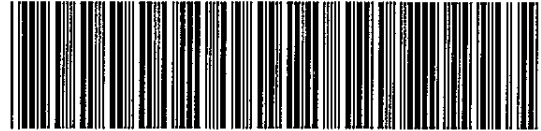
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/21/03--01076--004 **78.75

03 OCT 20 AM 10:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

03 OCT 20 AM 10:54

TRANSMITTAL LETTER

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

SUBJECT: Health Administration Advantage, 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Lori Clark
Name (Printed or typed)

3543 Red Pontiac Drive
Address

Port Orange, FL 32129
City, State & Zip

(386) 763-4137
Daytime Telephone number

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

FILED

ARTICLES OF INCORPORATION

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

03 OCT 20 AM 10:54

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Health Administration Advantage, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

3543 Red Pontiac Drive
Port Orange, FL. 32129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Administration Consulting
and any other lawful business

ARTICLE IV SHARES

The number of shares of stock is:

One-Hundred (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Director: Lori Clark
President: Lori Clark
Secretary: Lori Clark
Treasurer: Lori Clark

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Lori Clark
3543 Red Pontiac Drive
Port Orange, Florida 32129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lori Clark
3543 Red Pontiac Drive
Port Orange, Florida 32129

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

Lori Clark
Signature/Registered Agent

10/10/03
Date

Lori Clark
Signature/Incorporator

10/10/03
Date