

P040000 21854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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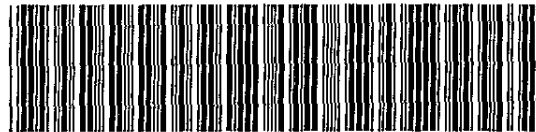
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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TS  
02/03/04

## TRANSMITTAL LETTER

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

SUBJECT: Diagnostix Medical Billing Corp.  
(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

\$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Jonathan Suarez  
Name (Printed or typed)

1252 SW 3<sup>rd</sup> ST  
Address

Miami, FL 33135  
City, State & Zip

(305) 6094721  
Daytime Telephone number

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

**ARTICLE OF ORGANIZATION  
OF  
DIAGNOSTIX MEDICAL BILLING CORP.**

The undersigned hereby subscribes to these Articles of Organization for a Corporation under the Laws of the State of Florida.

**ARTICLE I**

The name of this corporation is:

**DIAGNOSTIX MEDICAL BILLING CORP.**

**ARTICLE II**

The mailing address of the principal office of this corporation shall be P.O. Box 450087, Miami, FL 33245-0087 and such other place or places as the members from time to time may determine.

The name and address of the initial registered agent is:

Jonathan Suarez  
1252 SW 3<sup>rd</sup> St.  
Miami, FL 33135

**ARTICLE III**

The period of duration for the corporation shall be perpetual unless sooner dissolved in accordance with the laws of the State of Florida. The date of existence shall begin upon the filing of these Articles of Organization and upon acceptance by the Secretary of State. This limited liability company may engaged in any activity or business permitted under the laws of the United States and the laws of the State of Florida. Without limiting any of the purposes, powers and objects of this corporation it is expressly declared and provided that this corporation shall have power in carrying on its own business, or for the purpose of accomplishment of any of the purposes or attainment of its objects, to make and perform contracts of any kind and description and to do any and all other acts, to exercise any and all powers either as principal, agent or broker, conferred by the laws of Florida upon corporations, and which a partnership or natural person could do and exercise, and which now or hereafter may be authorized by the law.

**ARTICLE IV**

The number of shares of stock that is corporation has is 100.

Jonathan Suarez      100 shares

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## ARTICLE V

The name and address of the initial member of this corporation are:

President	Jonathan Suarez
Secretary	Jonathan Suarez
Treasurer	Jonathan Suarez

1252 SW 3rd St.  
Miami, FL 33135

## ARTICLE VI

The name and address of the registered agent and office is:

Jonathan Suarez  
1252 SW 3rd St.  
Miami, FL 33135

Jonathan Suarez  
Name of Registered Agent

  
Signature of Registered Agent

01/22/04  
Date

## ARTICLE VII

The name and address of the Incorporator is:

Jonathan Suarez  
1252 SW 3rd St.  
Miami, FL 33135

Jonathan Suarez  
Name of Incorporator

  
Signature of Incorporator

01/22/04  
Date

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