

JUN 4 2001 2:51PM
DIVISION OF CORPORATIONS

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.
Account Number : I19990000059
Phone : (954) 753-2222
Fax Number : (954) 753-1123

FLORIDA PROFTT CORPORATION OR P.A.

O.B. BILLING SYSTEMS, INC.

Certificate of Status	1
Certified Copy	0
Page Count	05
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Jun. 24. 2004 2:51PM

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CLERK OF COURT
JUL 24 AM 7:59
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE ONE

NAME

The name of the corporation shall be:
O.B. Billing Systems, Inc.

ARTICLE TWO-

PRINCIPAL OFFICE

The principle place of business and mailing address of this Corporation shall be:

150 S.E. 25th Road #11A
Miami, FL 33129

SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.
2801 N. University Drive suite 301
CORAL SPRINGS, FL 33065
(954) 753-2222 H040001330173

H040001330173

ARTICLE THREE
CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

ARTICLE FOUR
INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:
Alejandro Menendez
150 S.E. 25th Road # 11A
Miami, FL 33129

ARTICLE FIVE

INCORPORATOR

The name and address of the Incorporator is:
Alejandro Menendez
150 S.E. 25th Road #11A
Miami, FL 33129

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The undersigned has executed these Articles of
Incorporation. This 24th day of June.

Signature: 


Date: 6-24-04

CERTIFICATE OF DESIGNATED REGISTERED AGENT

Pursuant to the provisions of section 607.0501 Florida
Statutes, the Undersigned Corporation, under the Laws of the
State of Florida submits to the following statement
designating the registered agent in the State of Florida.

1. The name of the corporation is:
O.B. Billing Systems, Inc.

2. The name and address of the registered agent
Alejandro Menendez
150 S.E. 25th Road # 11A
Miami, FL 33129

Signature: 

Date: 6-24-04

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Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature: 

Date: 6-24-04

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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