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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 : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305) 444-4994  
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State of Florida  
Department of State  
Division of Corporations

**FLORIDA PROFIT CORPORATION OR P.A.**

**EXPRESS BILLING SERVICES, CORP**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 02      |
| Estimated Charge      | \$78.75 |

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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

Express Billing Services, Corp

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2955 S.W. 78 Ave. Miami FL 33155

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Billing.

**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):

Marisol Donis President  
2955 S.W. 78 AVE  
Miami FL 33155**ARTICLE VI REGISTERED AGENT**

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

Marisol Donis  
2955 SW 78 Ave. Miami FL 33155**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marisol Donis  
2955 SW 78 Ave. Miami FL 33155

\*\*\*\*\*  
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

Marisol Donis  
Signature/Registered Agent

10-5-04  
Date

Marisol Donis  
Signature/Incorporator

10-5-04  
Date

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