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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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

manrique medical billing & collection corp

Certificate of Status	0
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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:

MANRIQUE MEDICAL BILLING & COLLECTION CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
2955 WEST 80 STREET SUITE 203 HIALEAH FL 33018

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):

OSVALDO MANRIQUE 2955 WEST 80 STREET SUITE 203 HIALEAH FL 33018 PRESIDENT

VANESSA MANRIQUE 2955 WEST 80 STREET SUITE 203 HIALEAH FL 33018 VICEPRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

OSVALDO MANRIQUE 2955 WEST 80 STREET SUITE 203 HIALEAH FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OSVALDO MANRIQUE 2955 WEST 80 STREET SUITE 203 HIALEAH FL 33018

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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

Signature/Registered Agent — Date: 01/19/2005

Signature/Incorporator — Date: 01/19/2005

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