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Division of Corporations
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(((H05000101084 3)))

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To:

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

From:

Account Name : DAVID A. CHENKIN, P.A.
Account Number : T20000000115
Phone : (954) 476-7994
Fax Number : (954) 476-2382

FILED
05 APR 25 AM 8 00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FLORIDA PROFIT CORPORATION OR P.A.

JUCADE MEDICAL BILLING, INC.

Certificate of Status	1
Certified Copy	0
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4/26/05
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ARTICLES OF INCORPORATION

OF

JUCADE MEDICAL BILLING, INC.

FILED
05 APR 25 AM 8 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

JUCADE MEDICAL BILLING, INC.

The address of the principal office of this corporation shall be 5313 S.W. 118th Avenue, Cooper City, Florida, 33330 and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

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ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000,000 shares of common stock having \$.001 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 5313 S.W. 118th Avenue, Cooper City, Florida, 33330, and the name of the initial registered agent of the corporation at that address is MARIELA MORENTE.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS AND DIRECTORS

This corporation shall have one (1) officer and one (1) director, initially. The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed is:

MARIELA MORENTE
Pres./Dir.

5313 S.W. 118th Avenue
Cooper City, Florida 33330

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ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

MARIELA MORENTE
5313 S.W. 118th Avenue
Cooper City, Florida 33330

ARTICLE VIII. INFORMAL DIRECTOR ACTION

If all the Directors severally or collectively consent in writing to any action taken or to be taken by the Corporation, and the writings evidencing their consent are filed with the Secretary of the Corporation, the action shall be as valid as though it had been authorized at a meeting of the Board of Directors.

ARTICLE IX. INDEMNIFICATION

The Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X. BYLAW AMENDMENT

The power to adopt, alter, amend or repeal the bylaws of this Corporation shall be vested in the Board of Directors and Stockholders provided that such amendment be in compliance with the laws of Florida.

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04/22/05 FRI 16:21 FAX 954 476 2382

DAVID A CHENKIN PA

005

FROM : MORENTE

FAX NO. : 954682492743

Apr. 22 2005 04:01PM P1

04/22/05 FRI 09:27 FAX 954 476

005

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IN WITNESS WHEREOF, the undersigned Incorporator has executed these
Articles of Incorporation in the State of Florida this 22 day of April 2005.

David Morente
INCORPORATOR, MARIELA MORENTE

David Morente
REGISTERED AGENT, MARIELA MORENTE

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared MARIELA
MORENTE who, being first duly sworn by me, deposes and says that the foregoing
instrument is true and correct to the best of his knowledge, information and belief.

SWORN TO AND SUBSCRIBED before me this 22 day of April 2005.

My Commission Expires:



David Morente
NOTARY PUBLIC, State of Florida

____ Personally known to me, or
☒ Produced identification
FLDL M 65354070-7630
____ Did take an oath;
☒ Did not take an oath

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04/22/05 FRI 16:21 FAX 954 476 2382

DAVID A CHENKIN PA

0008

FROM : MORENTE

Apr. 22 2005 04:01PM P2
0008

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ACCEPTANCE OF REGISTERED AGENT

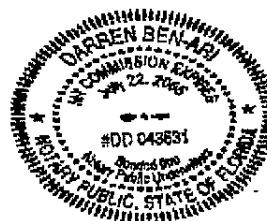
MARIELA MORENTE having been designated to act as Registered Agent,
hereby agrees to act in this capacity.

Mariela Morente
MARIELA MORENTE

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 22 day of
April, 2005, by Mariela Morente

Signature of Making public State of Florida
Personally Known _____ OR Type of ID. Produced FLD



FILED

05 APR 25 AM 8 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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