

P05000061862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

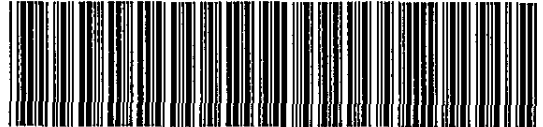
(Business Entity Name)

(Document Number)

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

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04/25/05--01051--011 \*\*122.50

FILED

05 APR 25 AM 8:39

CLERK OF COURT  
TALLAHASSEE, FLORIDA

1, Burch APR 28 2005

**CLAIMS & BILLING, INC.**  
**1239 Mount Logan Drive**  
**Apopka, FL 32712**  
**(407) 886-2414**

April 22, 2005

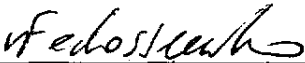
Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find articles of incorporation for Claims & Billing, Inc. and a check for \$122.50. Please apply this check to the filing fee and one (1) certified copy.

If you have any questions, you can contact me at the phone number shown above.

Thank you,

  
\_\_\_\_\_  
Victor Fedosseenko – Incorporator

**ARTICLES OF INCORPORATION  
OF  
CLAIMS & BILLING, INC.**

FILED  
05 APR 25 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following articles of incorporation.

***ARTICLE I***  
***NAME***

\*\*\*\*\*

The name of the corporation shall be: Claims & Billing, Inc.

***ARTICLE II***  
***PRINCIPAL OFFICE***

\*\*\*\*\*

The principal place of business and mailing address of this corporation shall be:  
1239 Mount Logan Drive  
Apopka, FL 32712

***ARTICLE III***  
***SHARES***

\*\*\*\*\*

This corporation is authorized to issue 100 shares of \$1.00 par value common stock, designated as common shares.

***ARTICLE IV***  
***INITIAL REGISTERED AGENT and ADDRESS***

\*\*\*\*\*

The name and address of the initial Registered Agent is:

Victor Fedosseenko  
1239 Mount Logan Drive  
Apopka, FL 32712

**ARTICLE V  
INCORPORATOR**

\*\*\*\*\*

The name and address of the Incorporator to these articles of incorporation is:

Victor Fedosseenko  
1239 Mount Logan Drive  
Apopka, FL 32712

The undersigned Incorporator has executed these articles of incorporation this 22<sup>nd</sup> day of April, 2005.

*Victor Fedosseenko*  
Victor Fedosseenko – Incorporator

**ARTICLE VI  
PURPOSE, EXISTENCE and INITIAL DIRECTORS**

\*\*\*\*\*

This business is organized for the purpose of transacting any and all lawful business. This corporation shall have perpetual existence, with an effective date of May 1, 2005. The initial Directors shall be:

Victor Fedosseenko  
1239 Mount Logan Drive  
Apopka, FL 32712

\*\*\*\*\*

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND OFFICE**

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the Registered Agent and Registered Office in the State of Florida.

The name of the corporation is: Claims & Billing, Inc.

The name and address of the Registered Agent and Office is:

Victor Fedosseenko  
1239 Mount Logan Drive  
Apopka, FL 32712

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

*Victor Fedosseenko*  
Victor Fedosseenko

*4-22-05*  
Date