

P05000102799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

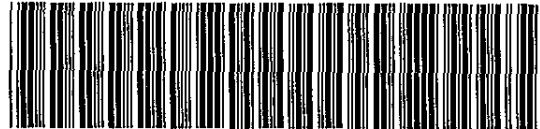
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

No copy D

Office Use Only



000057582220

07/22/05--01007--004 **70.00

FILED

05 JUL 22 PM 4: 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Burch JUL 22 2005

TRANSMITTAL LETTER

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

SUBJECT: HIPAA SOLUTIONS GROUP, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: JONATHAN SPECTOR
Name (Printed or typed)

1370 WASHINGTON AVE, SUITE 312
Address

MIAMI BEACH, FL 33139
City, State & Zip

786-264-1028
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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:

HIPAA SOLUTIONS GROUP, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1370 WASHINGTON AVE, SUITE 312
MIAMI BEACH, FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO HELP ENSURE THE AVAILABILITY, INTEGRITY, AND CONFIDENTIALITY OF
ELECTRONIC PROTECTED HEALTH INFORMATION AND TO ASSIST IN THE PROTECTION
AGAINST THREATS TO THE SECURITY OF THAT INFORMATION.

ARTICLE IV SHARES

The number of shares of stock is:

3000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JONATHAN SPECTOR - CEO, PRESIDENT

HEIDI SPENCER - COO, VICE PRESIDENT

KEVIN SPENCER - CTO, VICE PRESIDENT

1370 WASHINGTON AVE, #312
MIAMI BEACH, FL 33139

ARTICLE VI REGISTERED AGENT

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

ELLIOT SILVER
1370 WASHINGTON AVE, SUITE 312
MIAMI BEACH, FL 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JONATHAN L. SPECTOR
1370 WASHINGTON AVE, SUITE 312
MIAMI BEACH, FL 33139

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

7/19/05
Date



Signature/Incorporator

7-19-05
Date

FILED
05 JUL 22 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA