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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$78.75 \$87.50 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: ACCREDITED MEDICAL BILLING SPECIALISTS, INC

ACCREDITED MEDICAL BILLING SPECIALISTS, INC

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

ARTICLES OF INCORPORATION

OF

ACCREDITED MEDICAL BILLING SPECIALISTS INC. A FLORIDA **CORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:

Accredited Medical Billing Specialists, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

310 NE 1st Avenue Williston Florida 32696

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

The corporation is authorized to issue 100 shares at \$1.00 per value common stock.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET **ADDRESS**

The name and address of the initial registered agent is:

Jennifer Goode 310 NE 1st Avenue Williston FL 32696

ARTICLE V INCORPORATIOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Jennifer Goode 310 NE 1st Avenue Williston, FL 32696

Janet Giddens Pursley 310 NE 1st Avenue Williston, FL 32696

The undersigned inco	orporator(s) l	has (have) e	executed these	Articles of
Incorporation this	<u> </u>		day of Hugu	<u>S</u> 2005.
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Signatu	re/Registered	l Agent and	l Incorporator	 ·
	ane &	Purch	lein	
	Signature	Incorpora	itor/	