

P06000009022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

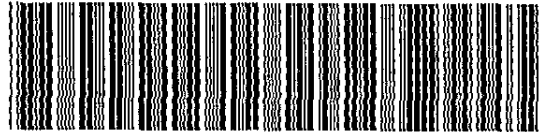
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 JAN 17 PM 12:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

T. Burch JAN 20 2006

COVER LETTER

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

SUBJECT: ME N Associates, 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: Maceline Etienne
Name (Printed or typed)

7310 NW 20th Street
Address

Sunrise, FL 33318
City, State & Zip

954.600.0278
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:

ME N Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7310 NW 20th Street
Sunrise, FL 33313

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):

Maceline Etienne
7310 NW 20th Street
Sunrise, FL 33313

ARTICLE VI REGISTERED AGENT

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

Maceline Etienne
7310 NW 20th Street
Sunrise, FL 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maceline Etienne
7310 NW 20th Street
Sunrise, FL 33313

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

MEtienne

Signature/Registered Agent

MEtienne

Signature/Incorporator

1/12/06

Date

1/12/06

Date

FILED

06 JAN 17 PM 12:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA