

P06000086862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

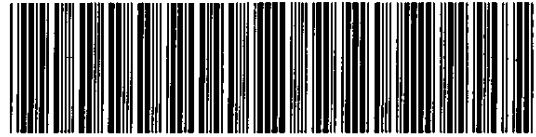
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/27/06--01024--001 **78.75

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06 JUN 28 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten initials

COVER LETTER

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

SUBJECT: NI BILLING SERVICES

(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: Nadia Ismael

Name (Printed or typed)

9745 SW 72 ST S-214

Address

Miami, FL 33173

City, State & Zip

305-412-2395

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:

NI BILLING SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

9745 SW 72 ST S-214
MIAMI, FL 33173

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NADIA ISMAEL (P)

ARTICLE VI REGISTERED AGENT

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


NADIA ISMAEL
9745 SW 72 ST S 214
MIAMI, FL 33173

ARTICLE VII INCORPORATOR

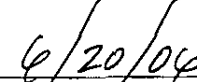
The name and address of the Incorporator is:

NADIA ISMAEL
15051 SW 146 ST
MIAMI, FL 33196

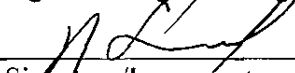
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



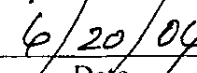
Signature/Registered Agent



Date



Signature/Incorporator



Date

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06 JUN 28 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA