

PO6000099037

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

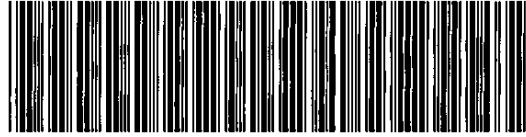
(Business Entity Name)

(Document Number)

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

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06 JUL 27 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Da

**COVER LETTER**

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

**SUBJECT:** Accurate Fast Secure Medical Billing & Coding Solutions 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Agnes Thomas Thompson  
Name (Printed or typed)

873 Crystal Lake Drive  
Address

Pompano Beach, Florida 33064  
City, State & Zip

954-941-9796  
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:

Accurate Fast Secure Medical Billing & Coding Solutions Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

873 Crystal Lake Drive  
Pompano Beach, FL. 33064

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Medical Billing Service

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Agnes Thomas Thompson  
873 Crystal Lake Drive  
Pompano Beach, FL. 33064

**ARTICLE VI REGISTERED AGENT**

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

Agnes Thomas Thompson  
873 Crystal Lake Drive  
Pompano Beach, FL. 33064

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Agnes Thomas Thompson  
873 Crystal Lake Drive  
Pompano Beach, FL. 33064

\*\*\*\*\*

*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*

Agnes Thomas  
Signature/Registered Agent

7/18/06  
Date

Agnes Thomas  
Signature/Incorporator

7/18/06  
Date

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