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(Requestor's Name)

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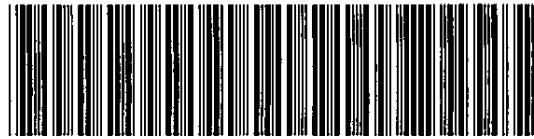
(Business Entity Name)

(Document Number)

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

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07 JUN -7 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

new Profit  
Art.  
SP

**COVER LETTER**

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

**SUBJECT:** MEDIVANCE BILLING SERVICE, 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:** CLIFTON H. RODRIQUEZ, CPA  
Name (Printed or typed)

3146 NW 68TH STREET  
Address

FORT LAUDERDALE, FLORIDA 33309-1206  
City, State & Zip

(954)969-9380  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

For

**Medivance Billing Service, Inc.**

FILED  
07 JUN -7 PM 1:19

The undersigned subscribers(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Article I-Name of the Corporation

The name of the corporation shall be:

**Medivance Billing Service, Inc.**

## Article II-Nature or Purpose of the Business

The purpose of the corporation is to engage in any lawful activity permitted by the laws of this state. The corporation will provide medical billing services to its customers and the general public in the Tri-County area, the State of Florida, and the United States. The corporation will comply with any professional regulations imposed by state agencies within the State of Florida as well.

## Article III-Principal Office

The initial principal business mailing address of this corporation shall be:

c/o Joan M. Smith  
10826 NW 40<sup>th</sup> Street  
Sunrise, Florida 33351

## Article IV-Number of Shares Authorized

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

One Thousand (1000)

(The par value of the corporation common stock will be \$1.00) Joan M. Smith will each own one hundred percent (100%) of the outstanding shares of the corporation.

## Article V-Initial Registered Agent

The name and address of the initial registered agent is:

Joan M. Smith  
760 NW 68<sup>th</sup> Avenue  
Plantation, Florida 33317

# ARTICLES OF INCORPORATION

For

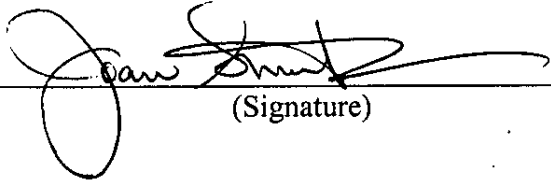
**Medivance Billing Service, Inc.**

## Article VI-Subscriber (s)

Joan M. Smith  
760 NW 68<sup>th</sup> Avenue  
Plantation, Florida 33317

The undersigned incorporator(s) has executed these Articles of Incorporation this

2<sup>nd</sup> day of June, 2007

  
\_\_\_\_\_  
(Signature)  
  
\_\_\_\_\_  
(Signature)

## Article VI: Perpetual Life of the Corporation

The corporation shall exist perpetually, or until such time that the Board of Directors and/or shareholder(s) decide to dissolve the corporation.

## Article VII-Appointment of Officers & Directors

The subscriber(s) of this corporation has appointed the following officers and directors of the corporations. These officers and directors will serve in accordance with the bylaws of the corporation:

|    | <u>Name</u>                    | <u>Address</u>  | <u>Title</u>                                    |
|----|--------------------------------|---|---|
| 1. | Joan M. Smith                  | 760 NW 68 <sup>th</sup> Avenue<br>Plantation, Florida 33317 | President/CEO/Chairperson<br>Board of Directors |
| 2. | Clifton H. Rodriguez, CPA, CIA | 3146 NW 68 Street<br>Ft. Lauderdale, FL 33309               | Board Advisor/Ex-Officio                        |

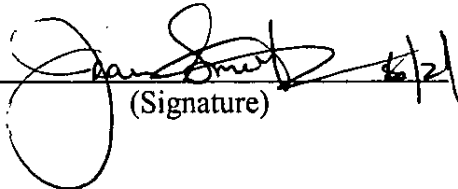
**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

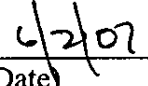
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Medivance Billing Service, Inc.**
  
2. The name and address of the registered agent and office are as follows:

**Joan M. Smith  
760 NW 68<sup>th</sup> Avenue  
Plantation, Florida 33317**

*Having been named as registered agent and to accept service for the above stated corporation at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

  
(Signature)

  
(Date)