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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 DEC 26 PM 4:26

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12/27

Melissa gave  
authorization to add  
1,000 shares

813-758-2146

12-27-07

## COVER LETTER

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

SUBJECT: Reliable Transcription Services, 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: Melissa Lemus  
Name (Printed or typed)

P.O. Box 781  
Address

Dover, FL 33527  
City, State & Zip

813-758-2146  
Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# 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:

Reliable Transcription Services, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

business address: 3549 Mott Road  
Dover, FL 33527

mailling address: P.O. Box 781  
Dover, FL 33527

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business as it pertains to the  
medical trancription field for profit

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Melissa M. Lemus - president / CEO  
P.O. Box 781  
Dover, FL 33527

marcelino Lemus, Jr. - vice president / CFO  
P.O. Box 781  
Dover, FL 33527

**ARTICLE VI REGISTERED AGENT**

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

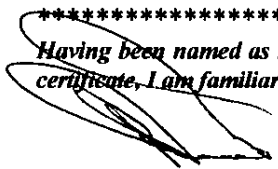
Acevedo & Company  
Gerry Acevedo  
1383 Oakfield Drive  
Brandon, FL 33511

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Melissa M. Lemus  
3549 Mott Road  
Dover, FL 33527

\*\*\*\*\*  
*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

12/20/07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/18/2007  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA