

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name ; ULTIMATE MEDICAL BILLING, INC.

Account Number : I20030000011 Phone : (305)263-9500

Fax Number : (305)223-9300

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FLORIDA PROFIT/NON PROFIT CORPORATION

Island Pool Framing, Inc.

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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B. McKnight APR 0 8 2008

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ARTICLES OF INCORPORATION

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Article of Incorporation.

ARTICLE 1- NAME

Island Pool Framing, Inc.

ARTICLE II-PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

5180 NW 7 Street, #804 Miami, FL 33126

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Oswaldo Jose Navas 5180 NW 7 Street, # 804 Miami, FL 33126

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Oswaldo Jose Navas 5180 NW 7 Street, #804 Miami, FL 33126

The undersigned incorporator has executed these Articles of Incorporation this 4th day of _April_, 2008.

ARTICLE VI - DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Oswaldo Jose Navas President 5180 NW 7 Street, #804 Miami, FL 33126

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT 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 STATUES RELATED TO THE PROPER AND COMPLETED PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

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