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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

M&L Professional Medical Billing Service, Corp.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

DIVISION OF CORPORATION

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C.S. 4-30

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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:

M&L PROFESSIONAL MEDICAL BILLING SERVICE, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is:

389 NW 103 TER.

PEMBROKE PINES, FLORIDA 33026

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT:

HELENE ORSINI

389 NW 103 TER.

PEMBROKE PINES, FLORIDA 33026

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PAGE 2 M&L PROFESSIONAL MEDICAL BILLING SERVICE, CORP.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

HELENE ORSINI
389 NW 103 TER.
PEMBROKE PINES, FLORIDA 33026

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

HELENE ORSINI
389 NW 103 TER.
PEMBROKE PINES, FLORIDA 33026

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Having been named as registered agent to accept service of process for the above 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.

Helene Orsini
HELENE ORSINI / REGISTERED AGENT

4-28-08
DATE

Helene Orsini
HELENE ORSINI / INCORPORATOR

4-28-08
DATE