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CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOG	CUMENT NUMBER(S), (if known):
1. LANZA Prof (Corporation Name)	ESSIONAL BILLING (Document #)
	(Document #)
3(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait	2.06
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other
•	Examinaria Initials

FILED

ARTICLES OF INCORPORATION

2009 MAR 24 P 12: 31

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF STATE FORMING A

FORMING A

CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION

ACT, HEREBY

ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

LANZA professional Billing SERVICES, Corp.

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

3972 SW 10 Ferrell MIGN, FC 33174

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

ELISA PEDRAJA 8972 SW 10 Ferrale Many, FC 33174.

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

ELISA PEDRAJA: 8972 SW 10 TERRACE Miami FL 33174.

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

OF INCORPORATION THIS

DAY OF HARCH, 2

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

ELISA PEDRAJA (President).

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

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 STATUTES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION

REGISTERED AGENT SIGNATURE