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COVER LETTER

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

SUBJECT:	<u> </u>	LING, COL	
Enclosed are an orig	(PROPOSED CORPOR	ticles of incorporation and	
□ \$70.00	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee. Certified Copy & Certificate of Status
FROM:	2812 SW 1	e (Printed or typed) $\frac{49^{7H} PLAC}{\text{Address}}$	
	Cit	y, State & Zip 3 3 - 0 7 5	

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



May 5, 2009

WAMILA FLEITAS 2812 SW 149TH PLACE MIAMI, FL 33185

SUBJECT: ELY BILLING, CORP Ref. Number: W09000020854

We have received your document for ELY BILLING, CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 909A00014917

Paisley A Alford Clerk New Filing Section

Division of Cornerations - P.O. ROY 6327 - Tallahasson Florida 32314

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: ELY BILLING, CORP ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 2812 SW 149" PLACE, MIAMI, FL 33185 ARTICLE III PURPOSE The purpose for which the corporation is organized is: FOR BILLING IN MEDICAL'S OFICE ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS مِي List name(s), address(es) and specific title(s): YAMILA FLEITAS AS PRASIDENT ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: -> 2812 SW 149 PL, MIANI YAMILA FLEITAS FL 33185 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: YAMILA FLEITAS -> 2812 SW 149 PL, MIRMI, FL 33185 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 occept the appointment as registered agent and agree to act in this capacity 04. 29.09 Signature/Registered Agent 5-13-09 Date

Signature/Incorporator