P11000012851

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the same

COVER LETTER

Department of State

New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: SMCA, Inc.	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
(PROPOSED CORPORA)	TE NAMÉ – <u>MÚST INCLÚDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Christa Name	Merolus
Name	(Printed or typed)
10211 Pines Blud	2 Ste. 171
A	Address
Pembroke Pines, FL City,	33076 State & Zip
786 - 320 - Daytime To	elephone number
info@SMCAbiling E-mail address: (to be used	g, Com Pror future annual report notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 11, 2011 -

CHRISTA MEROLUS 10211 PINES BLVD STE. 171 PEMBROKE PINES, FL 33026

SUBJECT: SMCA, INC (SUNSHINE'S MEDICAL CLAIMS AUDIT, INC)

Ref. Number: W11000001577

We have received your document for SMCA, INC (SUNSHINE'S MEDICAL CLAIMS AUDIT, INC) and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 711A00000848

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME		
The name of the co	propriation shall be: 5MCA, Inc		
ARTICLE II	PRINCIPAL OFFICE		
ARTICLETI		Mailing a	ddress, if different is:
•	Principal street address 10211 Fines BIND Ste 171	waning a	datess, it different is.
-	Pembilke Pines, FL 33026		
ARTICLE III			
The purpose for w	hich the corporation is organized is:		the state was
The genera	I purpose for which this C	orporation is orga	nited 18 TO
م نده در عط	any or all lawful busin	ice formitted	under the laws of
THUNSOUT C	ing or all lawren busin	677 (CI	ance re-
he state	of Florida.		
A DOMEST IN THE	CITADDO		
The number of shore	res of stock is: 100 Shares Author		and the second
The number of sha	les of stock is. 100 5 haves partier	red far value	181.00 Class of Stock Com
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		
Name and Ti	itle: Christa M Merolus CE		
Address:	10211 Pines Blud Ste 171		<u> </u>
	Pembruke Pines, FL 33020	<u> </u>	
Name and Ti	ille: Christa Merclus President	Name and Title:	
Address:	10211 Pines Bluc Ste 171	Address:	
	Rembroke Pines, FL 33021	وم	
N. 100	va.	Name and 2014 a.	≱ ∞ <u> </u>
Name and 11 Address:	itle:		γ.Ω Τ η
Address:		Address.	<u> </u>
			子 小 元 章
			一
	REGISTERED AGENT		2 GO
	orida street address (P.O. Box NOT acceptable)	of the registered agent is:	Sign of the sign o
Name: Address:	Christa Merolys. 10211 Pines BIVZ Ste 171	. 	
Audress.	PEMBIONE PINES, FL 38		
	113-13-13-13-13-13-13-13-13-13-13-13-13-	<u></u> 040	
ARTICLE VII	INCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	Christa Merolus	.	
Address:	10211 Pines Blud Stc 17 Rembolic Pines, FL33021	\mathcal{T}	
	PRADOKE FINES, FL330ZE	****	
Having been nam	ed as registered agent to accept service of proce	ss for the above stated corp	oration at the place designated in
	m familiar with and accept the appointment as re		
01			ا ا
Ne	we stup		1/3/2011
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein ar		
aocument to the D	epartment of State constitutes a third degree felo	ny as proviaed for in s.817.1	JJ, F.J.
Vh.	1-61-6		1/2/24
UIV	Required Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	7 3 7 20 11 Date
	required Signature/Incorporator		Date