

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION HEALTH CARE SOLUTIONS BILLING & CONSULTING CORP.

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ARTICLE OF INCORPORATION

OF

HEALTH CARE SOLUTIONS BILLING & CONSULTING CORP.

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

ARTICLE I NAME

The name of the corporation shall be:

HEALTH CARE SOLUTIONS BILLING & CONSULTING CORP.

The principal place of business of this corporation shall be:
6230 SW. 188 AVE.
SOUTH WEST RANCHES, FL. 33332

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 x \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

GLORIA C. ALVAREZ 6230 SW. 188 AVE. SW. RANCHES L.33332 DIRECTOR

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is $\{are\}$:

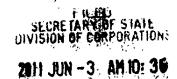
The undersigned has (have) executed these Article of Incorpora

GLORIA C. ALVAREZ
6230 SW. 188 AVE.
SW. RANCHES.FL. 33332

PRESIDENT, DIRECTOR
100 shares

Signature/Title

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:
HEALTH CARE SOLUTIONS BILLING & CONSULTING CORP.
2. The name and address of the registered agent and office
is GLORIA C. ALVAREZ
(Name)
6230 SW. 188 AVE.
(P. O. BOX NOT ACCEPTABLE)
SW. RANCHES, FLORIDA 33332
(CITY/STATE/ZIP)
iaving been named as registered agent and to accept service Of process for the above stated corporation at the place dasi
as registered agent and agree to act in this capacity. I fur
THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES ESLATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES
AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY
POSITION AS MY POSITION AS REGISTERED AGENT.
An acd a
SIGNATURE & DICKE C. Alex
раде 6-3-11