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Email Address: grossman@sfur.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
Hospital Bill Negotiations, Inc.

Certificate of Status	1
Certified Copy	0
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of 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:

Hospital Bill Negotiations, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1550 Madruga Avenue, Suite 412  
Coral Gables, FL 33146

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rebecca Yu  
396 Alhambra Circle, Suite 200  
Coral Gables, FL 33134

Prepared By:  
Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

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H14000212367

**ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)**

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Joel Grossman - Treasurer/Director  
1550 Madruga Avenue #412, Coral Gables, FL 33146

**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Joel Grossman  
1550 Madruga Avenue #412, Coral Gables, FL 33146

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9th day of September 20 14

  
Joel Grossman                      Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Hospital Bill Negotiations, Inc.

2. The name and address of the registered agent and office is:

Rebecca Yu  
Name

396 Alhambra Circle, Suite 200  
(P.O. Box or Mail Drop Box NOT Acceptable)

Coral Gables, FL 33134  
(City / State / Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

Rebecca Yu, C.P.A.  
Rebecca Yu  
SIGNATURE

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