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LAZARUS

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA PROFIT/NON PROFIT CORPORATION
SLH BILLING AND CONSULTING INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Corporate Filing Menu

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

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FILED

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ARTICLE I NAME: The name of the corporation is:SLH Billing and Consulting Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

19504 SW 103 ctCutler Bay, FL 33157**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Sayli Lopez(P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Sayli Lopez19504 SW 103 CTCutler Bay FL 33157**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Sayli Lopez19504 SW 103 CTCutler Bay FL 33157

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Required Signatures:

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 accept the appointment as registered agent and agree to act in this capacity

Sayli L _____
Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.

Sayli _____
Incorporator Date

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