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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
MIANGE MEDICAL BILLING CORP**

Certificate of Status	0
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Miange Medical Billing Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

Miange Medical Billing Corp18350 NW 2ND Ave Suite 622Miami Garden FL 33169**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Elizabeth Barreras - P**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Elizabeth Barreras18350 NW 2 AVE Ste 622Miami Garden FL 33169**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Elizabeth Barreras18350 NW 2 AVE Ste 622Miami Garden FL 33169

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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



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 §817.155, F.S.



Incorporator_____
Date17 JUL 26 09:24:19
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