

1/7/2021

PZ1000001032Division of Corporations
Florida Department of StateDivision of Corporations
Electronic Filing Cover Sheet

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(((H21000008607 3)))



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To:

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

From:

Account Name : MEDICAL BILLING CONSULTANTS, INC.
Account Number : I20200000206
Phone : (305)463-6690
Fax Number : (305)463-6693

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION**Florida ABA Specialist Corp**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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

ARTICLE I NAMEThe name of the corporation shall be: Florida ABA Specialist Corp**ARTICLE II PRINCIPAL OFFICE**Principal street address
10381 SW 68TH LN

Mailing address, if different is:

Miami, FL 33173**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and All lawful business**ARTICLE IV SHARES**The number of shares of stock is: 2**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Tania Soto / PresidentName and Title: Maria Del Pilar Cardet IbarraAddress 10381 SW 68TH LNAddress: 9022 SW 123 CT RDMiami, FL 33173Apt 101Miami, FL 33186

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Tania Soto
Address: 10381 SW 68TH LN
Miami, FL 33173

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Maria Del Pilar Cardet Ibarra
Address: 9022 SW 123 CT RD, Apt 101
Miami, FL 33186

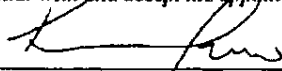
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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



Required Signature/Registered Agent

01/07/21
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.817.155, F.S.



Required Signature/Incorporator

Date

01/07/21