Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000213520 3)))



H240002135203ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 : (305)675-5944 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. $^{\bullet \, \rm o}$

Fmail:	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION PROFESSIONAL MEDICAL BILLING, CORP.

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

- Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
Professional Medical Billing, Corp.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
3698 SW 153pt, Miami, Fl. 33185.
7, 1,50,111, 1, 1, 5, 5, 1
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Lianka Clodia Escarp. (P)
ARTICLE W INFERAL DEGLEGOEDER A COMMUNICATION OF THE PROPERTY
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Lianka Clodia Escarp.
3698 SW 153 PL. Miami, Fl. 33185.
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Lianka Clodia Escarp.
3698 SW 153 PL Miami, Fl 33185.

6/18/2024

1 3

EIN: 99-3590936

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

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.