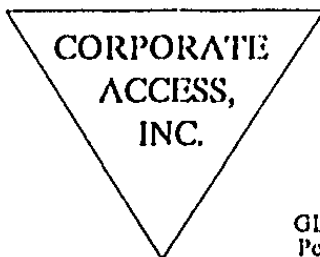


P95000017902



1116-D Thomasville Road
Mount Vernon Square
Tallahassee, Florida 32303
(904) 222-2666
(904) 222-1666 (Fax)
(800) 969-1666

GLINDA P. BENNETT
Personal Representative

00000001 4 2 1 4 1 3
00 00000000 00000000
*****70,000 *****70,000

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. All Medical Billing Services, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 3-6 11:00
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Handwritten Copy
☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Per phone call
with Glinda:
Client is aware
of Corporation w/
similar name
(P94-39043),
still wants to
file their name.

114
3-6-15

AFFIDAVIT OF ROBERT W. HAMILTON, JR.,
AS TRUSTEE FOR ALL MEDICAL BILLING
SERVICES, INC., a dissolved Florida Corporation

STATE OF FLORIDA)
COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, duly authorized by law to administer oaths and take acknowledgments, personally appeared, ROBERT W. HAMILTON, JR., as Trustee on behalf of All Medical Billing Services, Inc., a dissolved Florida corporation, who, after being duly sworn deposes and states as follows:

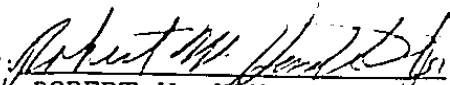
1. I, ROBERT W. HAMILTON, JR., was the last known Director and President of All Medical Billing Services, Inc., a dissolved Florida Corporation, which was dissolved on August 26th, 1994.

2. I have personal knowledge of the facts contained in this Affidavit and am authorized to give it.


3. On behalf of All Medical Billing Services, Inc., a dissolved Florida Corporation, and as Trustee, I do hereby relinquish all right, title and interest to the corporate name, All Medical Billing Services, Inc., and further assign, transfer and authorize Broward Adjustment Services, Inc. to use that name and hereby transfer all right, title and interest that All Medical Billing Services, Inc. has or may have in the name to Broward Adjustment Services, Inc.

FURTHER AFFIANT SAYETH NAUGHT.

ALL MEDICAL SERVICES, INC.

By: 
ROBERT W. HAMILTON, JR.,
as Trustee
(President and Director)

SWORN TO AND SUBSCRIBED before me the undersigned authority,
personally appeared, ROBERT W. HAMILTON, JR., this 30 day of
Nov, 1994, who is personally known to me or who has
produced _____ as identification, and who did
voluntarily execute this Affidavit of his own free will.


Notary Public, State of Florida

STATE of Florida
City of Miami

My commission expires: 3/03/98



JEFFREY SPIRO
COMMISSION # GC 358720
EXPIRES MAR 23, 1998
BONDED THRU
ATLANTIC BONDING CO., INC.

ASSIGNMENT

Broward Adjustment Services, Inc., a Florida corporation, in consideration of Ten Dollars (\$10.00), the receipt of which is hereby acknowledged, hereby assigns and transfers all of its right, title and interest in and to the name ALL MEDICAL BILLING SERVICES, INC. to Ronald J. France and John J. France and further authorize them to use that name in the formation of a new Florida corporation.

Dated this 21st day of February, 1995.

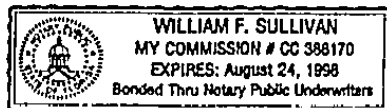
BROWARD ADJUSTMENT SERVICES, INC.

by: John J. France
John J. France, President

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 21st day of February, 1995, by John J. France, president of Broward Adjustment Services, Inc.



William F. Sullivan
NOTARY PUBLIC
Print Name: William F. Sullivan

My commission expires:

Personally Known: X OR Produced Identification: _____

Type of identification produced: _____

ARTICLES OF INCORPORATION
OF
ALL MEDICAL BILLING SERVICES, INC.

FILED
95 MAR -6 PM 12:03
CLERK OF DISTRICT COURT
JULY 1995

ARTICLE I- NAME

The name of the corporation is ALL MEDICAL BILLING SERVICES, INC.

ARTICLE II-DURATION

This corporation shall have perpetual existence.

ARTICLE III-PURPOSE

This corporation is organized for the purposes of transacting any and all lawful business.

ARTICLE IV-CAPITAL STOCK

This corporation is authorized to issue 1000 shares of common stock, with a par value of \$1.00 per share.

ARTICLE V- PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI- INITIAL PRINCIPAL OFFICE

The initial street address in this state of the principal office of the corporation will be 2876 East Oakland Park Boulevard, Fort Lauderdale, FL 33306.

ARTICLE VII-INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 2401 E. Atlantic Boulevard, Suite 410, Pompano Beach, FL 33062, and the name of the initial registered agent of this corporation at that address is William F. Sullivan, Esquire.

ARTICLE VIII-INITIAL BOARD OF DIRECTORS

This corporation shall have Two director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial director(s) of the corporation is (are):

NAME

ADDRESS

John J. France

2876 East Oakland Park Boulevard
Fort Lauderdale, FL 33306

Ronald J. France

2876 East Oakland Park Boulevard
Fort Lauderdale, FL 33306

ARTICLE IX-INCORPORATOR

The name and address of the person(s) signing these Articles is (are)

NAME

ADDRESS

William F. Sullivan,

2401 E. Atlantic Boulevard, Suite 410
Pompano Beach, FL 33062

IN WITNESS WHEREOF, the undersigned subscriber has (have) executed these Articles of Incorporation on the 23rd day of February, 1995.

Sign: 

Print: William F. Sullivan, Esquire

Address: 2401 E. Atlantic Boulevard, Suite 410
Pompano Beach, FL 33062

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared William F. Sullivan, Esquire, who executed the foregoing Articles of Incorporation and he/she (they) acknowledged before me that he/she (they) executed these Articles of Incorporation.

Sworn to and subscribed before me this 23RD day of February, 1995.

NOTARY PUBLIC

sign Carole K Holmes

print CAROLE K. HOLMES

Personally known: ✓ OR Produced Identification _____ Type
of identification produced: _____



ACCEPTANCE AS REGISTERED AGENT

I hereby accept the designation of registered agent with the initial street address of the registered office of this corporation being 2401 E. Atlantic Boulevard, Suite 410, Pompano Beach, FL 33062.

Print: William F. Sullivan, Esquire

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared William F. Sullivan, Esquire, who executed the foregoing Acceptance as Registered Agent and he/she acknowledged before me that he/she executed this Acceptance as Registered Agent.

Sworn to and subscribed before me this 33RD day of February, 1995

NOTARY PUBLIC

sign Charles K Holmes
print CHARLES K HOLMES

Personally known: ✓ OR Produced Identification _____

Type of identification produced: _____

