

P95 0000 43070

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

300001499243
-05/25/95--01054--014
****122.50 ****122.50

SUBJECT: MANAGED CARE SUPPORT SYSTEMS, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

EDDIE KHANT

Name (printed or typed)

1369 HAMPTON BLVD.

Address

N. LAUDERDALE, FL. 33068

City, State & Zip

(305) 720-1743

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1995 MAY 25 AM 10:02

FILED

W 9 5-

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MANAGED CARE SUPPORT SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1369 HAMPTON BLVD.
N. LAUDERDALE, FL. 33068

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TALLAHASSEE, FLORIDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time

is: 100 SHARES Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EINDAR MYATHAING
~~A/K/A: EDDIE KHAT~~
1369 HAMPTON BLVD.
N. LAUDERDALE, FL. 33068

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

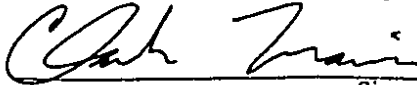
~~EDWARD MYAHLAINE~~
~~ALICE DOOLE KAMANT~~
1369 HAMPTON BLVD.
N. LAUDERDALE, FL. 33068

CLARK TRAINER
1733 CORAL GRO. DR
FT. LAUD., FL 33334

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

23 day of MAY, 19 95.


Signature


Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: MANAGED CARE SUPPORT SYSTEMS, INC.
2. The name and address of the registered agent and office is:

EINDAR MYAHLAING A/K/A: EDDIE KHANT
(NAME)

1369 HAMPTONS BLVD.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

N. LAUDERDALE, FL 33334
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

23 MAY '95
(DATE)