## AWARUS CORPORATE INDUSTRIES, (Requestor's Name) 890 S.W. 87 AVENUE, SUITE: 16 (Address) MIAMI, FLORIDA 33174 (305)552-5973 OFFICE USE ONLY (Phone #) (City, State, Zip)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

200001517202 -06/20/95--01040--018 \*\*\*\*125.00 \*\*\*\*125.00

	CORPORATION NAM	E(S) & DOCUMENT NUM	MBER(S) (if known):		
	1. Cobles	Distinct Sel	(m) (m)		
	(Corporation Name)		(Document 4)		
	2. (Corporation Name)		(Document #)		
,	3.		(Document #)		
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			(Document #)		
	Walk in Pick up time 2.100		Certified Copy		
	Mail out W	fill wait Photocopy	Certificate of Status		
-	NEW FILINGS	AMENDMENTS			
γ	Profit	Amendment			
	NonProfit	Resignation of R.A., Office	cer/Director		
	Limited Liability	Change of Registered Age	ent		
_	Domestication	Dissolution/Withdrawal			
	Other	Merger			
OTHER FILINGS		REGISTRATION/ QUALIFICATION	1 15		
	Annual Report	Foreign	1 / 1		
	Fictitious Name	Limited Partnership	1		
	Name Reservation	Reinstatement			
		Trademark			
anaF031 (10/03)		Other	Examiner's Initials		
	CR2E031(10/92)				



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 14, 1995

LAZARUS

TALLAHASSEE, FL

SUBJECT: GABLES BILLING SERVICE, INC.

Ref. Number: W95000012128

We have received your document for GABLES BILLING SERVICE, INC. and check(s) totaling \$125.00. However, your check(s) and document are being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6903.

Nancy Hendricks Corporate Specialist

Letter Number: 195A00029180

#### ARTICLES OF INCORPORATION

WE, the undersigned, hereby associate ourselves together for the purpose of becoming a Corporation under the laws of the State of Florida providing for the formation of a Corporation for profit, with the powers, rights, privileges and immunities hereinafter mentioned, and we hereby make, subscribe and acknowledge and file with the Secretary of the State of Florida these Articles of Incorporation; and to that end we do, by these Articles, set forth:

#### ARTICLE I

The name of this Corporation ( Which is hereinafter called the " Corporation " is: GABLES PROFESSIONAL BILLING SERVICE TAKE THE ARTICLE II

This Corporation shall exist perpetually. Corporate existence shall begin on the day upon which these Articles are approved by the Secretary of the State of Florida.

### ARTICLE III

The purpose of this Corporation is to transact any or all lawful businesses for which Corporations may be incorporated under Chapter 607 of the Florida Statutes.

#### ARTICLE IV

This Corporation is authorized to issue Five Hundred ( 500 ) Shares of Common Stock, which said shares shall have a par value of Ten ( \$10.00 ) Dollars per share upon issuance.

### ARTICLE V

The principal place of business of this Corporation shall be at 1610 Country Club Prado Coral Gables, Florida 33134 with the privilege of having branch offices within and without the State of Florida.

#### ARTICLE VI

The initial registered agent of this Corporation upon whom process may be served is ISABEL CUESTA and the initial registered office is located at 1610 Country Club Prado Coral Gables, Florida 33134

#### ARTICLE VII

This Corporation shall have ONE director (s) initially. The number of directors shall be fixed by the bylaws and may be changed from time to time.

#### ARTICLE VIII

The name and street addresses of the initial director(s) of this Corporation are:

ISABEL CUESTA 1610 Country Club Prado Coral Gables, Florida 33134

The aforesaid director(s) shall hold office for the first year of this Corporation's existence or until a successor is chosen as provided for in the bylaws.

The initial officers of this Corporation and their addresses are:

President: ISABEL CUESTA 1610 Country Club Prado

Coral Gables, Florida 33134

Vice President: NOT YET ELECTED

Treasurer: NOT YET ELECTED

Secretary: ISABEL CUESTA 1610 Country Club Prado

1610 Country Club Prado Coral Gables, Florida 33134

#### ARTICLE IX

The name and street address of the incorporator(s) is/are:

ISABEL CUESTA 1610 Country Club Prado Coral Gables, Florida 33134

The undersigned has(have) executed these Articles of Incorporation this <u>June</u> day of <u>5</u>, 19 95

Signature /Title

ISABEL CUESTA, PRESIDENT SECRETARY

# CERTIFICATE OF DESIGNATION 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.

9		
1.	The name of the Corporation is: GABLES PROFESSIONAL BILLING	·_
S	RVICE, INC.	_
2.	The name and address of the registered agent and office is:	
	ISABEL CUESTA	
	1610 Country Club Prado Coral Gables, Florida 33134	
	Signature: Deale Cue-to- Corporate Officer	
	ISABEL CUESTA	
	Title: PRESIDENT	
	Date: <u>JUNE 5, 1995</u>	
proc thic Age: with com	ing been named as Registered Agent and to accept service of the above stated Corporation at the place designated is Certificate, I hereby accept the appointment as Registered to and agree to act in this capacity. I further agree to complet the provisions of all statutes relating to the proper are plete performance of my duties, and I am familiar with an apply the obligations of my position as Registered Agent.	in ed ly id
Date	JUNE 5, 1995 Isake Cuesta	_
	Registered Agent	
	ISABEL CUESTA	

Page 4				
State of Flo County of Da	•			
The foregoli	ng Articlos of Inco , 1995	orporation by	Was acknowle ISABEL CUE	dgod before mo
	to be the incorpo	rator (a) o	f GABLES BI	LLING
and ISABEL	CUESTA		acknowledge	ed and agreed
to the desig	nation and duties	of Registe	red Agent fo	or the above
mentioned Co	rporation that is	being orga	nized under	the laws of
the State of	Florida.			
	No	tary Public Florida,	, In and For At Large	the State of
Expiration:	OFFICIAL NOTARY S LOUIS F CAST SIGNARY PUBLIC STATE O COMMISSION SOLC MY COMMISSION EXPLM	F FLORIDA		FILED 95 JUN 15 PN 3: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA