

P96000024856

TRANSMITTAL LETTER

FILED
MAR 15 PM 2:25
TALLAHASSEE, FL 32314

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

SUBJECT: TOTAL BILLING SOLUTIONS, INC.
(Proposed corporate name - must include suffix)

200001745242
-03/15/96--01102--006
****131.25 ****131.25

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: TOTAL BILLING SOLUTIONS, INC.
Name (printed or typed)
4270 N. W. 19th AVENUE
Address
POMPANO BEACH, FL. 33064
City, State & Zip
(305) 362-7316
Daytime Telephone number

3-20-96
JB

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:

TOTAL BILLING SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

4270 N. W. 19th AVENUE
POMPANO BEACH, FL. 33064

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SECRETARY OF STATE
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 HUNDRED (100) SHARES OF COMMON STOCK
ONE (\$1.00) PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CORLISSA DAY
2104 WEST 68th STREET
HIALEAH, FL. 33016

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):

HOWARD M. WEINSTEIN
23452 MIRABELLA CIRCLE SOUTH
BOCA RATON, FL. 33433

CORLISSA DAY
8432 DUNDEE TERRACE
MIAMI LAKES, FL. 33016

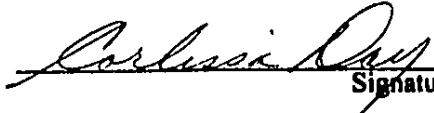
ISABELITA TIPTON
8427 REDNOCK LANE
MIAMI LAKES, FL. 33016

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

12 day of MARCH, 19 76.



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: TOTAL BILLING SOLUTIONS, INC.

2. The name and address of the registered agent and office is:

CORLISSA DAY

(NAME)

2104 WEST 68th STREET

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

HALEAH, FL. 33016

(CITY/STATE/ZIP)

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.

Corlissa Day
(SIGNATURE)

3/12/96
(DATE)