

TRANSMITTAL LETTER

P97000/5019

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

SUBJECT: A + D Professional Medical Billing Inc.
(Proposed corporate name - must include suffix)

600002079226--7
-02/05/97--01133--004
*****78.75 *****78.75

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: Deborah M. HUBBARD
Name (Printed or typed)

10501 SW 50 ST.
Address

COOPER CITY FL. 33328
City, State & Zip

(954) 434-6040
Daytime Telephone number

97 FEB 14 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

February 6, 1997

DEBORA M HUBBARD
10501 S.W. 50TH ST
COOPER CITY, FL 33328

SUBJECT: A & D PROFESSIONAL MEDICAL BILLING INC.
Ref. Number: W97000003039

We have received your document for A & D PROFESSIONAL MEDICAL BILLING INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 797A00006426

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

A & D PROFESSIONAL MEDICAL BILLING INC

ARTICLE II PRINCIPAL OFFICE

10501 S.W. 50 STREET
COOPER CITY , FL 33328

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Two (2)

ARTICLES IV INITIAL REGISTERED AGENDA AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

Debora M. Hubbard
10501 S. W. 50 Street
Cooper City, FL 33328

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TALLAHASSEE FLORIDA

ARTICLES 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):


Debora M. Hubbard
10501 S W 50 St
Cooper City, FL 33328

Ann M. Kregoski
12356 N W 12 Ct
Pembroke Pines, FL 33026

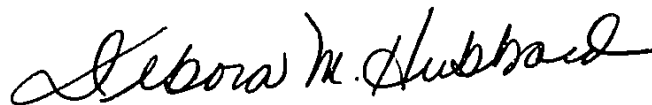
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 2 day of FEBRUARY, 1997.

(An additional article must be added if an effective date is requested.)


Signature


Signature

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation, A & D Professional Medical Billing Inc.



Debora M. Hubbard

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SECRETARY OF STATE
TALLAHASSEE FLORIDA