

P98000024545

TRANSMITTAL LETTER

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

100002447911--4
-03/05/98--01029--018
****131.25 ****131.25

SUBJECT: PHYSICIANS SUPPORT SERVICES, 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: ARTURO DIAZ JR.
Name (Printed or typed)

6600 COWPEN RD. SUITE 300.
Address

MIAMI LAKES, FL 33014
City, State & Zip

(305) 557-4616
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 MAR 16 PM 3:23

FILED

W98 5044

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 6, 1998

ARTURO DIAZ JR.
6600 COWPEN ROAD
SUITE 300
MIAMI LAKES, FL 33014

SUBJECT: PHYSICIANS SUPPORT SERVICES, INC.
Ref. Number: W98000005044

We have received your document for PHYSICIANS SUPPORT SERVICES, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6067.

Neysa Culligan
Document Specialist

Letter Number: 398A00012409

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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PRACTICE SUPPORT SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

6600 COWPEN ROAD
SUITE 300
MIAMI LAKES, FL 33014

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

SIXTA CASTILLO
15600 N.W. 67 AVENUE
MIAMI LAKES, FL 33014

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ART DIAZ
6600 COWPEN RD.
SUITE 300
MIAMI LAKES, FL 33014

Signature/Incorporator

3/2/98

Date

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

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/Registered Agent

3/2/98

Date