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

\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT:	Precise Billing Systems, Inc. (Proposed corporate name - must include suffix)	
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Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

Filing Fee & Certificate **\$122.50** 

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Registered Corporate Agents, Inc. Name (Printed or typed)

612 S. Greenwood Ave.

Address

Clearwater, FL 33.7.56

City, State & Zip

Daytime Telephone number

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

## 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.

ARTICLE	T	NAME

The name of the corporation shall be:

Precise Billing Systems, Inc.

PRINCIPAL OFFICE ARTICLE II

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

7378 Jomel Drive Spring Hill, FL 34607

SHARES ARTICLE III

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

10,000 Shares Authorized

## INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

Lisa M. Hartle 7378 Jomel Drive Spring Hill, FL 34607

INCORPORATOR ARTICLE V

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

Registered Corporate Agents, Inc. 612 S. Greenwood Ave.

Clearwater, FL 33756

Signature/Incorporator

President

(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