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4/29/98

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

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NAME: STATEWIDE MEDICAL BILLING SERVICE, INC.

AUDIT NUMBER.....H98000008140

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 3

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Bm 4/30/98

ARTICLES OF INCORPORATION
OF

STATEWIDE MEDICAL BILLING SERVICES, INC.

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

ARTICLE I NAME

The name of the corporation shall be:

STATEWIDE MEDICAL BILLING SERVICES, INC.

The principal place of business of this corporation shall be:

13727 S.W. 152 Street #316, Miami, Florida 33177

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time

100 shares at \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

ZAIDA R. ACOSTA/PRES. 13727 SW 152 St.#316, Miami, Fl. 33177
MARCOS L. ACOSTA/VICE PRES. 13727 SW 152 St.#316, Miami, Fl. 33177

Prepared By: FAST CORP. AGENTS
MICHAEL I. SANTUCCI
5201 NW 74 Ave.
Miami, Fl. 33166
(800) 714-6191

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TALLAHASSEE FLORIDA

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ZAIDA R. ACOSTA 13727 SW 152 Street #316, Miami, Fl. 33177

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 29th day of April, 1998.

Signature(s) of Incorporator(s)



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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

STATEWIDE MEDICAL BILLING SERVICES, INC.

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

ZAIDA R. ACOSTA 13727 SW 152 Street #316

(P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33177

(CITY/STATE/ZIP)

SIGNATURE 

TITLE PRESIDENT

DATE April 29, 1998

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 

DATE April 29, 1998