P98000088808

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

SUBJECT: <u>Ultimate Billing & Collections Services</u> , INC. (Proposed corporate name - must include suffix)		
Enclosed is an original and one(1) copy of the articles	500002664935—5 -10/15/88—01089—0115 *****131.25 ******87.50 s of incorporation and a check for :	
□ \$70.00 □ \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate	
	ADDITIONAL COPY REQUIRED	
FROM: EVELYN Reyes Name (Printed or typed)		
6781 CROOKED Palm Lane		
Miami Lakes, Florida 33014 City, State & Zip		
Daytime Telephone number Daytime Telephone number		
AUTHORIZATION BY PHONE TO CORRECT AT THE TOTAL DATE 10-19-98 DOC. EXAM BR	TARY OF STATE	

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

FILED

ARTICLES OF INCORPORATION

98 OCT 15 AM 10: 10

Date

Date

The undersigned incorporator, for the purpose of forming a corporation under the Florida RETARY OF STATE

TALLAHASSEE, FLORIDA

The name of the corporation shall be:
Ultimate Billing & Collections Services, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
6781 CROOKED Palm Lane Miami Lakes, Florida 33014 ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
3-Shares.
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Evelyn Reyes 6781 CROOKED POLM LONG
Miami Lakes, Florida 33014
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are: Evelyn Reyes
6781 CROOKED Palm Lane
M's was a second
Miami Lakes, Florida 38014
10-13-98
Signature/Incorporator Deto

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

Having been named as registered agent and to accept service of pro-	ocess for the above stated corporation at the place designated in this
certificate, I hereby accept the appointment as registered agent an	of garee to get in this connects. I feet
e complete ne complete ne contrate de la complete ne	a agree to act in this capacity. I juriner agree to comply with the erformance of my duties, and I am familiar with and accept the
obligations of my position as registered agent	ing contained by my duties, and I am jumitian with and accept the
	$\sim 10^{-10}$
	10-13-98
Signature/Registered Agent	Date