

999000004215  
(SAMPLE LETTER OF TRANSMITTAL)

Date

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

300002736333--9

-01/11/93--01074--004  
\*\*\*\*122.50 \*\*\*\*\*78.75

Re: ON-TIME BILLING SERVICES CORP.  
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

LISET MORERA  
(individual's name)

99 JAN 11 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

ON-TIME BILLING SERVICES CORP.  
(name of corporation)

MAILING ADDRESS OF CORPORATION		
7385 S.W. 21ST ST.		
MIAMI - FLA. 33155		
PHONE		
(305)	442-9669	Ext.
Area Code	Number	

(305) 264-4800 Liset

60  
1/14

TO: Sharon Davis  
FROM: Liset Monera

Dear Mrs. Davis:

Please I appreciate if you  
can return these documents  
by Federal Ex. delivery next day  
and credit to my account.  
#207279854.

Thank you for your cooperation  
in this matter.

Sincerely,

Liset Monera

Note:

Please send  
me a copy  
by fax to  
open the bank  
account.

Fax (305) 264-0015



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

January 7, 1999

LISSET MORERA  
7385 SW 21 STREET  
MIAMI, FL 33155

SUBJECT: ON-TIME BILLING SERVICES CORP.  
Ref. Number: W99000000458

We have received your document for ON-TIME BILLING SERVICES CORP., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The document must have original signatures.

The registered agent must sign accepting the designation.

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) 487-6924.

Sharon Davis  
Document Specialist Supervisor

Letter Number: 499A00000805

## ARTICLES OF INCORPORATION

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

FILED  
99 JAN 11 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

ON-TIME BILLING SERVICES CORP.

### ARTICLE II PRINCIPAL OFFICE

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

7385 S.W. 21ST STREET  
MIAMI - FLA 33155

### ARTICLE III SHARES

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

ONE THOUSAND SHARES (1000) PAR ONE (1.00)

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:


LISET MORERA

7385 S.W. 21ST STREET  
MIAMI - FLA 33155

**See instructions for officers/directors**

L I S E T M O R E R A      P R E S / D I R E C T O R  
7385 S. W 21ST STREET  
MIAMI - FLA - 33155

4 day of JANUARY, 19 99.


 Liset Morera  
 \_\_\_\_\_  
 Signature MORERA  
 \_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 is ON-TIME BILLING SERVICES CORP.
2. The name and address of the registered agent and office is:\_\_\_\_\_

LISET MORERA  
(NAME)

7385 S.W. 21st STREET  
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI — FLA. 33155  
(CITY/STATE/ZIP)

99 JAN 11 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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.

Liset Morera  
(SIGNATURE)  
LISET MORERA

01-04-99  
(DATE)