

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

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SUBJECT: LI	CEA ABSOLUTE BILLING (Proposed corpo	SOLUTIONS INC.	(x)	<u> </u>		- 🔄 :
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM:	Jose R. Licea Name (Pr	inted or typed)	-		- - 3	
	18520 N.W. 67 Ave. # 137 Address					
	Miami, Florida 33015 City, State & Zip				. — . —	
	305-623-4769 Daytime Te	lephone number	JASS	APR I	Ŧ	e e

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

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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.

FILED 9 APR 12 PM 2:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

LICEA ABSOLUTE BILLING SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

18520 N.W. 67 Avenue

Suite # 137

Miami, Florida 33015

ARTICLE III SHARES

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

50%

Jose R. Licea, Presidaent/Owner

50%

Fernando Rex Licea, Vice President/owner

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Fernando Rex Licea, V.P.

18520 N.W. 67 Ave. # 137

Miami, Florida 33015

ARTICLE V INCORPORATOR

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

Jose R. Licea, President 18520 N.W. 67 Ave, # 137 Miami, Florida 33015

Signature/Incorporator

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(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

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Date