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COVER LETTER

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

SUBJECT:			CERAMICS, 1		
	(PRÓP	OSED CORPORA'	FE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an or	riginal and one (1) copy of the artic	cles of incorporation and	d a check for:	
☐ \$70.00 Filing Fee		e of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status	
			ADDITIONAL CO	OPY REQUIRED	
FROM: _			(Printed or typed)		
10897 STONINGTON AVE Address					
	FORT	MYERS City,	FL 3391 State & Zip	3	
_	(23	9) 561- Daytime Te	19993 Elephone number		
	JM E-mail a	qqq Qddress: (to be used	JUNO COM	notification)	

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

APPHOVED AND FILED

ARTICLES OF INCORPORATION 09 NOV 19 PM 3: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

LEGACY DENTAL CERAMICS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address will be:

7780 CAMBRIDGE MANOR PLACE FORT MYERS, FL 33907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO OPERATE AS A DENTAL LABORATORY UNDER CHAPTER 466,FLORIDA STATUTES

ARTICLE IV SHARES

The number of shares of stock is:

TWENTY (20)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

The names and addresses and titles are:

JEAN MATRISCIANO

10897 STONINGTON AVE

FORT MYERS, FL 33913

PRESIDENT

SECRETARY/TREASURER

DAVID MATRISCIANO

10897 STONINGTON AVE

FORT MYERS, FL 33913

VICE-PRESIDENT

ARTICLE V1 REGISTERED AGENT

The name and street address of the registered agent is:

JEAN MATRISCIANO 10897 STONINGTON AVE. FORT MYERS, FL 33913

09 NOV 19 PM 3: 08

SECRETARY UP STATE TALLAHASSEE, FLORIDA

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

JEAN MATRISCIANO 10897 STONINGTON AVE. FORT MYERS, FL 33913

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator