

P09000101939

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
DR. TIERNEY PETTINATO, D.M.D., P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
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12/21/2009

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:

ARTICLE I NAME

The name of the corporation shall be:

Dr. Tierney Pettinato, D.M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal Address: 26942 Cotton Key Lane
Wesley Chapel, FL 33544

Mailing Address: 26942 Cotton Key Lane
Wesley Chapel, FL 33544

ARTICLE III SHARES

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

One-Thousand (1,000) Shares
Common Stock

ARTICLE IV INITIAL REGISTERED AGENT

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

Dr. Tierney Pettinato, D.M.D.
26942 Cotton Key Lane
Wesley Chapel, FL 33544

ARTICLE V INCORPORATORS

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

Dr. Tierney Pettinato, D.M.D.
26942 Cotton Key Lane
Wesley Chapel, FL 33544

ARTICLE VI OFFICERS

The officer(s) of the corporation are:

Dr. Tierney Pettinato, D.M.D. President, Secretary, Treasurer
26942 Cotton Key Lane
Wesley Chapel, FL 33544

ARTICLE VII DIRECTORS

The director(s) of the corporation are:

Dr. Tierney Pettinato, D.M.D. - Director
26942 Cotton Key Lane
Wesley Chapel, FL 33544

ARTICLE IX BUSINESS PURPOSE

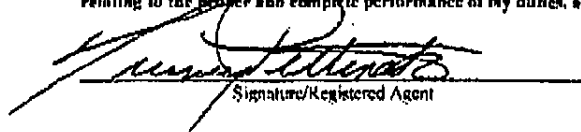
The business purpose of the corporation is:

Dentistry


Signature/Incorporator

12-18-09
Date

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

12-18-09
Date

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