

Florida Department of State
Division of Corporations
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
ADVANCED SMILE DENTAL CLINIC INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2ND REQUEST

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**ARTICLE I NAME:** The name of the corporation is:Advanced Smile dental Clinic Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

19900 NW 78 pathMIAMI, FL 33015**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Dr. Laura E. Perez DDS (President)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

19900 NW 78 pathMIAMI, FL 33015LAURA E. PEREZ**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Laura E. Perez19900 NW 78 pathMIAMI, FL 33015

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Required Signatures:

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

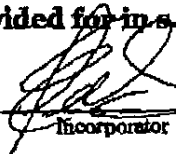


Registered Agent

7-8-2016

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.



Incorporator

7-8-2016

Date

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