

CONTACT

OFFICE USE ONLY (Document #)

UCC FILING & SEARCH SERVICES, INC.

(Requestor's Name)

526 EAST PARK AVENUE

(Address)

TALLAHASSEE FL 32301

(City, State, Zip)

(904) 681-6528

(Phone #)

OFFICE USE ONLY

FILED  
97 MAY -8 PM 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1 Family Dental Group of Miami # 2 Inc.  
(Corporation Name) (Document #)

2 \_\_\_\_\_  
(Corporation Name) (Document #)

3 \_\_\_\_\_  
(Corporation Name) (Document #)

4 \_\_\_\_\_  
(Corporation Name) (Document #)

Walk In

Pick Up Time

Mail Out

Will Wait

Photocopy

Certified Copy

Certificate of Status

Certificate of Good Standing

ARTICLES ONLY

ALL CHARTER DOCS

Certificate of FICTITIOUS NAME

FICTITIOUS NAME SEARCH

CORP SEARCH

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R A, Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**HOLD FOR  
PICKUP BY  
UCC SERVICES**

Examined's Initials

9/5/8/97

RECEIVED  
97 MAY -8 PM 11: 25  
DIVISION OF CORPORATION

**ARTICLES OF INCORPORATION**  
**FOR**  
**FAMILY DENTAL GROUP OF MIAMI #2, INC.**

---

FILED  
97 MAY -8 PM 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation:

**ARTICLE I**

**NAME.** The name of the corporation shall be **FAMILY DENTAL GROUP OF MIAMI #2, INC.**

**ARTICLE II**

**PLACE OF BUSINESS.** The principal place of business and the mailing address of this corporation shall be:

14610 Dade Pine Ave  
Miami Lakes, FL 33014

**ARTICLE III**

**STOCK.** The number of shares of stock that this corporation is authorized to have outstanding at any one time is 900 shares.

**ARTICLE IV**

**PURPOSES.** The general purposes for which the corporation is organized are the following:

- (a) Provide dental care services and products.
- (b) To engage in and transact any lawful business for which corporations may be incorporated under the Florida General Counsel Corporation Act. No other purpose limits this general purpose in any way; and
- (c) To do such things as are incidental to the purposes of the Corporation or necessary or desirable in order to accomplish them.

**FAMILY DENTAL GROUP OF MIAMI #2, INC.**

**ARTICLE V**

MANNER OF ELECTION OF DIRECTORS. The directors shall be elected pursuant to the By-Laws of the Corporation. The number of directors of the Corporation shall be as set forth in the By-Laws of the Corporation.

**ARTICLE VI**

CORPORATE POWERS. The corporate powers shall be as set forth in the Florida Statutes, as amended.

**ARTICLE VII**

REGISTERED AGENT AND ADDRESS. The address of the corporation's registered office and the name of its registered agent are:

Phillip B. Rarick, Esq.  
7850 N.W. 146th St., Ste. 502  
Miami Lakes, FL 33016

**ARTICLE VIII**

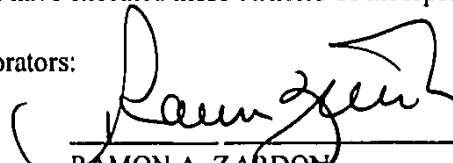
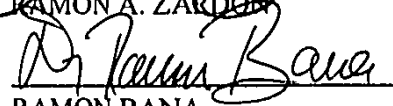
INCORPORATORS. The names and addresses of the incorporators for these Articles of Incorporation are:

Ramon A. Zardon  
14610 Dade Pine Ave  
Miami Lakes, FL 33014

Ramon Bana  
7060 W. 16th Ave.  
Hialeah, FL 33014

The undersigned have executed these Articles of Incorporation this April 30, 1997

Signature of the Incorporators:

  
\_\_\_\_\_  
RAMON A. ZARDON  
  
\_\_\_\_\_  
RAMON BANA

FILED  
97 MAY -8 PH 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name of the Corporation is FAMILY DENTAL GROUP OF MIAMI #2, INC..

The name and address of the registered agent and office is:

Phillip B. Rarick, Esq.  
7850 N.W. 146th St., Ste. 502  
Miami Lakes, FL 33016

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.

  
PHILLIP B. RARICK

DATE: April 30, 1997