

PG6000072638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

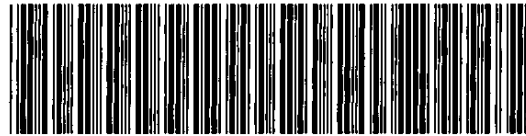
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2006 MAY 22 A 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5-25-06  
WPC

## COVER LETTER

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

SUBJECT: TALIA A PUMA P.A.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: TALIA A PUMA  
Name (Printed or typed)

9900 SW 59 CT  
Address

COOPER CITY FL 33328  
City, State & Zip

954-895-5051  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

TALIA A PUMA P.A.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9900 SW 59 CT  
COOPER CITY FL 33328

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ANY AND ALL ACTIVITIES IN CONNECTION  
WITH THE PRACTICE OF DENTISTRY.

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

TALIA A PUMA  
9900 SW 59 CT  
COOPER CITY FL 33328  
PRESIDENT

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JEFFREY C PUMA  
6550 N FEDERAL HWY STE 240  
FORT LAUDERDALE FL 33308



## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TALIA A PUMA  
9900 SW 59 CT  
COOPER CITY FL 33328

\*\*\*\*\*

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/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

FILED  
2006 MAY 22 A 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5/17/2006  
\_\_\_\_\_  
Date  
5/17/06  
\_\_\_\_\_  
Date