

TRANSMITTAL LETTER

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00 FEB 14 AM 9:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: All Seasons Dental Clinic, Inc.  
(Proposed corporate name - must include suffix)

500003135125--2  
-02/15/00--01011--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is 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: Charles S. Baldwin  
Name (Printed or typed)

141570 South Military Trail, Ste C-2  
Address

Delray Beach, Florida 33445  
City, State & Zip

(561) 637-7728  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: ALL SEASONS DENTAL CLINIC, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

14570 South Military Trail  
Suite C-2  
Delray Beach, Fla. 33445

**ARTICLE III SHARES**

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

One Thousand

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Charles S. Baldwin  
5742 Aspen Ridge Circle  
Delray Beach, Fla. 33484

**ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Article of Incorporation are:

Charles S. Baldwin  
5742 Aspen Ridge Circle  
Delray Beach, Fla. 33484

Charles S. Baldwin  
Signature of Incorporator

Feb. 5, 2000  
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.

Charles A. Baldwin  
Signature/ Registered Agent

Feb. 5, 2000  
Date

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TALLAHASSEE, FLORIDA