PROCESTA 937

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

SUBJECT: Marilyn C. Sandor D.D.S, M.S., P.A. (PROPOSED CORPORATE NAME MARIE M				
Enclosed is an origin	al and one(1) copy of the article	O *	0332851L 7/13/0001100- ****78.75 *****	}——¬;
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	-
FROM:		nted or typed)		ميعدد
Address Acceptable Address Acceptable Address Acceptable Acceptable Address Acceptable A				
	(847) 381 - 0657	ate & Zîp	TARY OF STATE HASSEE FLORIDA	•

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 24, 2000

LOUIS SANDOR 21072 N. HWY 59 BARRINGTON, IL 60010

SUBJECT: MARILYN C. SANDOR D.D.S., M.S., PC

Ref. Number: W00000018324

We have received your document for MARILYN C. SANDOR D.D.S., M.S., PC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The only acceptable corporate suffixes for professional associations are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Teresa Brown Corporate Specialist

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Letter Number: 100A00040164

Louis Sandor 21072 N. Hwy. 59 Barrington, IL 60010 July 31, 2000 (847) 381 0657

Ms. Teresa Brown Corporate Specialist FLORIDA DEPT. OF STATE P.O. Box 6327_ Tallahassee, FLA 32314

Subject: Marilyn C. Sandor D.D.S., M.S., P.A.

Ref. Number: W00000018324

Dear Ms. Brown:

Thank you for your letter of July 24, 2000.

Enclosed is our document, along with a copy, corrected as per your recommendation. Also enclosed is a copy of your letter of July 24, 2000.

We would appreciate your using the original file date.

If any other corrections are required please feel free to call us collect.

Thank you again for your prompt attention.

Very truly yours,

Louis Sandor

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:

Marilyn C. Sandor D.D.S., M.S., P.A.

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SECRETARY OF STATE

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Cambridge Square 3447 Pine Ridge Road Suite A Naples, Florida 34109

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To practice the profession of dentistry in accordance with regulatory requirements of the state of Florida and to engage in any lawful act or activity in accordance with the laws of Florida for which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is:

100,000 shares of common stock, the transfer of which is restricted by the bylaws of the corporation.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

Dr. Marilyn C. Sandor 451 Bayfront Place Unit 5302 Naples, Florida 34102

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Louis Sandor 21072 N HWY 59 Barrington, IL 60010

Signature/Registered Agent

in Hando

Signature/incorporator

7/15/0

Date

7/15/00 Date