Division of Corporations

Page 1 of 2



Florida Department of State

Division of Corporations
Public Access System
Kutherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000062698 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : A.A.ALI, CPA
Account Number : I20000000192
Phone : (407)298-3900
Fax Number : (407)298-0660

OO DEC -1 PN 3: 43
SECRETARY OF STATE
TALL AHASSEE EL COLA

FLORIDA PROFIT CORPORATION OR P.A.

ARIF ZAMAN, DMD, P.A.

Certificate of Status	1
Certified Copy	
Page Count	04
Estimated Charge	\$78.75



FILED

ARTICLES OF INCORPORATION

00 DEC -1 PM 3: 43

OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARIF ZAMAN, DMD, P.A.

(A FLORIDA CORPORATION)

I, the undersigned, hereby make, subscribe, acknowledge and file these Articles of Incorporation for the purpose of becoming a corporation for profit under the laws of the State of Florida and do hereby further certify that I have become such corporation under and pursuant to the following Articles of Incorporation:

ARTICLE I

The name of the corporation is:

ARIF ZAMAN, DMD, P.A.

ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida, specifically, the practice of dentistry,

ARTICLE III

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

One thousand (1,000) Shares with \$1.00 par value.

ARTICLE IV

The amount of capital with which this corporation shall and does hereby begin business, shall be and is the sum of One Thousand Dollars (\$1,000.00).

ARTICLE V

The corporation shall have perpetual existence.

ARTICLE VI

The initial street address of the principal office of this corporation shall be and is:

8600 5TH STREET, ORLANDO, FL 32836

ARTICLE VII

The number of Directors of this corporation shall be one. That number may be increased from time to time by the by-laws adopted by the stockholders.

ARTICLE VIII

The name and address of the first Board of Directors, who subject to the provisions of this Certificate of Incorporation, by-laws of this corporation and the laws of the State of Florida, shall hold office for the first year of the corporation's existence or until their successors are elected and qualified.

NAME

STREET ADDRESS

Arif Zaman

8600 5th Street Orlando, FL 32836

ARTICLE IX

The street address of the initial registered office of the corporation shall be 8600 5th Street, Orlando, FL 32836 and the name of the initial registered agent of the corporation at that address is Arif Zaman.

ARTICLE X

The name and mailing address of the incorporator is as follows:

NAME Arif Zaman MAILING ADDRESS 8600 5th Street Orlando, FL 32836

ARTICLE XI

The officers of this corporation shall be a President, a Secretary, a Treasurer and such other officers, agents and factors as may be deemed necessary, including one or more Vice Presidents. All officers, agents and factors shall be chosen in such manner, hold their offices for such terms and have such powers and duties as may be prescribed by the . - By-laws or determined by the Board of Directors.

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by law, and all rights conferred on stockholders therein are granted subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Artricles of Incorporation this 300 day of 1000 day of 1000 and certify that the facts herein stated are true.

Arif Zaman Incorporator

STATE OF FLORIDA COUNTY OF <u>OPANGE</u>

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Arif Zaman

FL DL #2 412-000-66-787-0

known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that they executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 30th day of Normals 2000.

(Notary Seal)

Notary Public, State of Florida at Large

NOTARY PUBLIC - STATE OF FLORIDA

N. WILLIAMS-BRYAN

COMMISSION # CC750138

My commission expires:

06-10-2002

FILED

00 DEC -1 PM 3: 43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE AND ACKNOWLEDGEMENT

OF REGISTERED AGENT

OF

ARIF ZAMAN, DMD, P.A.

Pursuant to Florida Statutes Sections 607.0505, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at:	8600 5 TH Street	
	Orlando, FL 32836	
has named:	Arif Zaman	
Innatad as sha	-f	

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Registered Agent

4