# 100021905

## AZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

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Examiner's Initials

TEF

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C	ORPORATION NAME(s) & DOCUMENT NUMBI	ER(S) (if known):	
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2.	(Confronting Francisco)	A RES	R
	(Corporation Name)	(Document #)	
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Other

# ARTICLES OF INCORPORATION OF

### **NOVA DENTAL LABORATORY INC.**



The undersigned incorporation (s), for the purpose of forming a corporation under the Florida Business Corporation Act. Hereby adopt(s) the following Articles of Incorporation.

### **ARTICLE I NAME**

The name of the corporation shall by:

Nova Dental Laboratory Inc.

### ARTICLE II PRINCIPAL OFFICE

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

1080 Sunset Strip Sunrise Fl 33313

### ARTICLE III CAPITAL STOCK

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

10000 share, USD 1.00 per share USD 10,000.00 5000 Share Juan F. Gutierrez 50%= USD 5,000.00 5000 Share Ruben Culebro 50% = USD 5,000.00

### ARTICLE IV REGISTERED AGENT AND ADRESS

The name and address of the initial registered agent is:

Juan F. Gutierrez 5005 S.W. 154 PL Miami Fl 33185

### ARTICLE V INCORPORATOR (S)

The name(s) and street address (es) of the incorporator (s) to these articles of incorporation is (are)

Juan F. Gutierrez 5005 S.W. 154 PL Miami Fl, 33185 Ruben Culebro 6395 Barton Creek Cir. Lake Worth Fl, 33463

The undersigned has (have) executed these articles of incorporation this  $21^{\underline{s}\underline{t}}$  day of February 2001

Juan F. Gutierrez /President Signature/Title

Ruben Culebro /Vice-President Signature/Title .

. /treasure Signature/Title .

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.325 Florida Status, 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.

1. The name of the corporation is:

### Nova Dental Laboratory Inc

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

Juan F. Gutierrez

5005 S.W. 154 PL

(P.O. BOX NOT ACCEPTABLE)

Miami Fl 33185 (CITY/STATE/ZIP)

Signature: CORPARATE OFFICE)

Title: PRESIDENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of section 607.325, Florida Statutes.

Signature.

Date. 2/28/04/20