## POI OCRASSICTION SECTION SECTI

01 MAY 29 PM 3: 26

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE TALLAHASSEE FLORIDA

SUBJECT:	Deeksha Set	hi, DMD, P ENAME-MUST INCLU	DE SUFFIX)	<del>_</del> .	
			*****78.7	-01084001	
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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Name (Pr	eeksha Sel	thi		
	2888 NW	99 <sup>th</sup> Terro	ace_		
·	SUNRISE City, S	FL 333	3 2 2		
	(954)7	49-8618			
	Daytime Te	elephone number	D. WHITE JUN -	2 2001	

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: Deeksha Sethi, DMD, P.A.
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: Sawgrass Square  12578 W. Sunrise Blud.  Sunrise, FL 33323
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: General Dentistry
ARTICLE IV SHARES The number of shares of stock is: 100 Shares of Common Stock with \$0.001 per share
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)  The name(s) and address(es):  Initial Director shall be: Dr. Deeksha Sethi  12578 W. Sunrise Blvd.  Sunrise, fl 33323  ORALL  OFFICERS/DIRECTORS (optional)  ARTICLE V INITIAL OFFICERS/
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:  2888 NW 99th Terrace Sunrise, FL 33322
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Deeksha Sethi