POIGALETTRY 7-859

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

SUBJECT: Brevard Dental Associates of Melbourne Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
			10000450 -07/27/01 *****87.5		
Enclosed are 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: Jodel Christie Name (Printed or typed)					
775 E. Merritt Island (SW4 #220) Address					
Merritt Island, Fl 32952 City, State & Zip					
(321) 453-0696 Daytime Telephone number					

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

1/30/0(

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	04 IIII: 27 PM 2-1-2
The name of the corporation shall be:	01 JUL 27 PM 3: 43
Brevard Dental Associates of melburne inc.	SECRETARY OF STATE
15 Could Denial Missoliaics O. Historiae Inc.	TALLAHASSEE FLORIDA
× ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	- -
3150 N. Wictham Rd.	
worth melboure, F1 32935	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Dental Services	
•	
ARTICLE IV SHARES	
The number of shares of stock is:	
15-05	_
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
Todd Edward Christie - President	
195 Alameda Dr.	
metriff Island Fl 32952	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	- r - r
Todd Eduard Christie	
775 E Merrita Island Causensy Suite 220	
Merntt Island Fl 3295-2	•
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Todal Edward Christie	
775 E Merritt Island Causinay Svite 220	
merrit+ Island F1 32952	
*****************	********
Having been named as registered agent to accept service of process for the above stated certificate. I am familiar with and accept the appointment as registered agent and agree	corporation at the place designated in this to act in this cavacity
118/1/00	
/ Well Chila (/M)	7/14/0/
Signature/Registered Agent	Date

Signature/Incorporator

7/14/01

Date