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Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

ANTONY A. LEE, D.M.D., P.A.

Certificate of Status Certified Copy Page Count 04 Estimated Charge

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ARTICLES OF INCORPORATION

OF

ANTONY A. LEE, D.M.D., P.A.

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ANTONY A. LEE, D.M.D., P.A.

ARTICLE II DURATION

This corporation should have perpetual existence.

ARTICLE III PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 311 NW 87 DRIVE # 212 PLANTATION, FL 33324

ARTICLE IV PURPOSE

The purpose of this corporation shall be: DENTAL OFFICE

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ARTICLE V CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares having an individual par value of \$ 1.00

ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:FERNANDO SILVA 9900 STIRLING RD., SUITE 240 COOPER CITY FL 33024

ARTICLE VII BOARD OF DIRECTOR(S)

The name and address of the initial board of directors shall be:

PRESIDENTDIRECTOR
ANTONY A. LEE

311 NW 87 DRIVE # 212 PLANTATION, FL 33324

ARTICLE VIII INCORPORATOR(S)

The name and address of the incorporator(s) to these Articles of incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC. 2444 NW 7th PLACE MIAMI, FL 33127

The undersigned has (have) executed these Articles of Incorporation this <u>02TH</u> day of <u>OCTOBER</u>, 2001.

INCORPORATOR

Ray Stermont Singing for

Empire Corporate Kit of America, inc.

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CERTIFICATION OF DESTINATION REGISTERED AGENT / REGISTERED OFFICE

ANTONY A. LEE, D.M.D., P.A.

(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Registered Agent

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