

Charter Number Only

PO200019160

Request Name

8905 NW 53 St. #C100

Address
Miami, FL 33166

City State ZIP Phone

593-5151F

CORPORATION(S) NAME

800004960408--
-02/20/02--01023--008
*****78.75 *****78.75

NON ONLY

Advanced Dentistry Specialists Practice, Inc.

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

Name	
Availability	
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Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

RECEIVED
02 FEB 20 AM 9:05

02 FEB 20 PM 12:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA



Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

WE THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR THE FORMATION OF A CORPORATION FOR PROFIT WITH THE POWERS, RIGHTS, PRIVILEGES AND IMMUNITIES HEREINAFTER MENTIONED, AND WE HEREBY MAKE, SUBSCRIBE AND ACKNOWLEDGE AND FILE WITH THE SECRETARY OF FLORIDA THESE ARTICLES OF INCORPORATION; AND TO THAT END WE DO, BY THESE ARTICLES, SET FORTH:

ARTICLE I

THE NAME OF THIS CORPORATION (WHICH IS HEREINAFTER CALLED THE "CORPORATION") IS

ADVANCED DENTISTRY SPECIALISTS PRACTICE, INC.
ARTICLE II

THIS CORPORATION SHALL EXIST PERPETUALLY, CORPORATION EXISTENCE SHALL BEGAIN ON THE DAY UPON WHICH THESE ARTICLES ARE APPROVED BY THE SECRETARY OF THE STATE OF FLORIDA.

ARTICLE III

THE PURPOSE OF THIS CORPORATION IS TO TRANSACT ANY OR ALL LAWFUL BUSINESSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER CHAPTER 607 OF THE FLORIDA STATUTES.

ARTICLE IV

THIS CORPORATION IS AUTHORIZED TO ISSUE FIVE HUNDRED (500) SHARES OF COMMON STOCK, WHICH SAID SHARES SHALL HAVE A PAR VALUE OF TEN (\$ 10.00) DOLLARS PER SHARE UPON ISSUANCE.

ARTICLE V

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE AT:

435 E. SHERIDAN STREET DANIA, FLORIDA 33004

WITH THE PRIVILEGE OF HAVING BRANCH OFFICES WITHIN AND WITHOUT THE STATE OF FLORIDA.

FILED
02 FEB 20 PM 12:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI

THE INITIAL REGISTERED AGENT OF THIS CORPORATION UPON WHICH PROCESS MAY BE SERVED IS: LOUIS F. CAST AND THE INITIAL REGISTERED OFFICE IS LOCATED AT: 8405 NW 53 STREET SUITE C-100 MIAMI, FLORIDA 33166

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR(S) INITIALLY.
THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE CHANGED FROM TIME TO TIME.

ARTICLE VIII

THE NAME AND STREET ADDRESSES OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:

JAIME ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004

THE AFORSAID DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS CORPORATION EXISTANCE OR UNTIL A SUCCESSOR IS CHOSEN AS PROVIDED FOR IN THE BYLAWS.

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES ARE:

PRESIDENT: JAIME ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004

VICE PRESIDENT: AMELIA SALAZAR ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004

SECRETARY: AMELIA SALAZAR ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004

TREASURER: JAIME ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004

ARTICLE IX

THE NAME AND STREET ADDRESS OF THE INCORPORATOR

JAIME ESTRADA
435 E. SHERIDAN STREET DANIA, FLORIDA 33004
THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION

Amalia Estrada , Secretary
SIGNATURE / TITLE

JAIME ESTRADA / PRESIDENT

CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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: ADVANCED DENTISTRY SPECIALISTS PRACTICE, INC.
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS LOUIS F. CAST AND THE
REGISTERED OFFICE IS AT 8405 NW 53 STREET SUITE C-100 MIAMI, FLORIDA 33166

SIGNATURE: Louis F. Cast

TITLE: PRESIDENT JAIME ESTRADA

DATE: 01/30/02

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR
THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

Louis F. Cast
LOUIS F. CAST

FILED
02 FEB 20 PM 12:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA