TRANSMITTAL LETTER O COOTAL SLATE

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: D	DENNIS R. HUEBNER, D. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>		· · · · · · · · · · · · · · · · · · ·
Enclosed is an origina	al and one(1) copy of the article		100061232 -07/01/02010 ******78.75 a check for :	:∠J——4 056005 *****78.75
☐ \$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: Barry E. Dickson, CPA Name (Printed or typed)				
	121 Palafox Place		•	÷"
	Pensacola, FL	ddress 32501 tate & Zip	02 JUL -1 PH SECRETARY OF TALLIAHASSEE.	TILE C

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

Daytime Telephone number

9/1)

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:

DENNIS R. HUEBNER, D.D.S., P.A.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

4555 Lillian Highway Pensacola, FL 32506

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Dental Practice

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)

The name(s) and address(es):

Dennis R. Huebner 4555 Lillian Highway 32506 Pensacola, FL

REGISTERED AGENT ARTICLE VI

The name and Florida street address of the registered agent is:

Dennis R. Huebner 4555 Lillian Highway 32506 Pensacola, FL

<u>ART</u>ICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dennis R. Huebner 4555 Lillian Highway 32506 Pensacola, FL

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

ris R. Hech

Signature/Incorporator