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Florida Department of State

Division of Corporations Public Access System

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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

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FLORIDA PROFIT CORPORATION OR P.A.

stephen c. najarian, dmd, pa

Certificate of Status	0
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ARTICLES OF INCORPORATION

CF

Stephen C. Najarian, DMD, PA

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be:

Stephen C. Najarian, DMD, PA

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is:

1019 S. University Plantation, FL 33324

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business. Denti stry

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SECRETARY OF STATE TALLAHASSEE, FLORID

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ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue are 100 share having an individual par value of \$1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be:

Stephen C. Najarian 1019 S. University Dr. Plantation, FL 33324

ARTICLE VII

The name and address of the initial board of director(s) shall be:

Stephen C. Najarian 1019 S. University Dr. Plantation, FL 33324

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

Stephen C Najarian 1019 S. University Dr. Plantation, FL 33324

The undersigned has executed these Articles of Incorporation this 31st day of January, 2003.

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CERTIFICATE OF LESICNATION REGISTERED AGENT/REGISTERED OFFICE

Stephen C. Najarian, DMD, PA

(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 THE ARTICLES OF INCROPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPANY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM PAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT

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