

PO3000075675

EFFECTIVE DATE

7-1-03

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

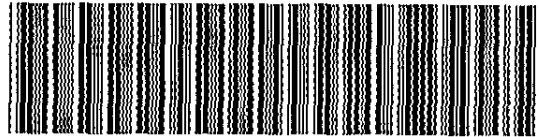
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FILED
03 JUL -3 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7-10-03
[Handwritten signature]

TRANSMITTAL LETTER

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

SUBJECT: Chinese-American Medical - Dental Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

DR. CHUN-IN LIN
Name (Printed or typed)

404 N. Perkins ST.
Address

Leesburg FL 34748
City, State & Zip

(352) 314-0888
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

EFFECTIVE DATE
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03 JUL -3 PM 2: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Chinese-American Medical-Dental Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*404 N. Perkins ST.
Leesburg FL 34748*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical & Dental Services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*DR. CHUN-IN LIN
404 N. Perkins ST.
Leesburg FL 34748*

ARTICLE VI REGISTERED AGENT

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

*Leonard A. Waiksnis
2351 S. Ridgewood AVE.
Edgewater, FL 32141*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*DR. CHUN-IN LIN
404 N. Perkins ST
Leesburg FL 34748*

ARTICLE VIII EFFECTIVE DATE

07/01/2003

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

Leonard A. Waiksnis

Signature/Registered Agent

6/30/03

Date

[Signature]

Signature/Incorporator

6/30/03

Date