

PO3000079409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

(Business Entity Name)

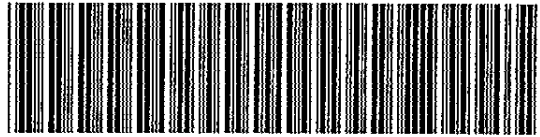
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Q. J. March
AUTHORIZATION BY PHONE TO
CORRECT
DATE 7/18/03
DOC EXAM
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07/17/03--01059--003 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JUL 17 PM 1:29

TRANSMITTAL LETTER

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

SUBJECT: Porcelain Plus, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Arleen M. March
Name (Printed or typed)

537 Hwy. 17-92 N. Suite #7
Address

Longwood, Florida 32750
City, State & Zip

407-696-7888
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

Porcelain Plus, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

537 Hwy. 17-92 N. Suite #7 Longwood, Florida 32750

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Dental Technology

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Arleen M. March, President and Manager

ARTICLE VI REGISTERED AGENT

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

Arleen M. March 537 Hwy. 17-92 N. Suite #7 Longwood, Florida 32750

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Arleen M. March 537 Hwy. 17-92 N. Suite #7 Longwood, Florida 32750

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

Arleen March

Signature/Registered Agent

7-14-03

Date

Arleen March

Signature/Incorporator

7-14-03

Date