

P03000/01541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

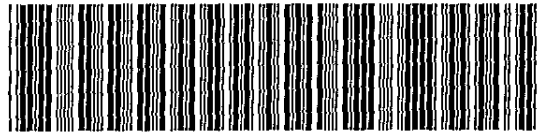
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03 SEP 12 AM 4:43
STATE
TALLAHASSEE, FLORIDA

CB 9/16

TRANSMITTAL LETTER

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

SUBJECT: ST. MARY DENTAL, 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: DR. ATEF AZIZ, DDS
Name (Printed or typed)

4676 CLEVELAND HEIGHTS BLVD
Address

LAKELAND, FLORIDA 33813
City, State & Zip

(863) 607 - 9030
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

ARTICLE I NAME

The name of the corporation shall be:

ST. MARY DENTAL , INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4676 CLEVELAND HEIGHTS BLVD
LAKELAND , FL 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL DENTAL

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

DR. ATEF AZIZ , DDS , PRESIDENT
4676 CLEVELAND HEIGHTS BLVD.
LAKELAND , FL 33813

ARTICLE VI REGISTERED AGENT

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

DR. ATEF AZIZ , DDS
4676 CLEVELAND HEIGHTS BLVD.
LAKELAND , FL 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DR. ATEF AZIZ , DDS
4676 CLEVELAND HEIGHTS BLVD.
LAKELAND , FL 33813

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

Atif E. Aziz
Signature/Registered Agent

9/9/03
Date

Atif E. Aziz
Signature/Incorporator

9/9/03
Date