

# P03000102189

Florida Department of State  
Division of Corporations  
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**To:**

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**From:**

Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608) 827-5300  
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## FLORIDA PROFIT CORPORATION OR P.A.

Oral and maxillofacial surgery center of west Orland

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FAX AUDIT # 46030002788807**ARTICLES OF INCORPORATION**

In compliance with Chapter 607, F.S.

**ARTICLE I NAME**The name of the corporation shall be: **Oral and maxillofacial surgery center of west Orlando, inc.****ARTICLE II PRINCIPAL OFFICE**The principal place of business and mailing address of this corporation shall be:  
10000 West Colonial Drive, Suite 389, Ocoee, Florida 34761.**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Oral Surgery

**ARTICLE IV SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 2,000. The par value of each share of stock is \$0.01.

**ARTICLE V OFFICERS/DIRECTORS**

The initial director of the corporation is:

Dr. Hector Briceno, 10000 West Colonial Drive, Suite 389, Ocoee, Florida 34761

**ARTICLE VI REGISTERED AGENT**

The name and Florida Street address of the registered agent is: Business Filings Incorporated, 660 East Jefferson Street, Tallahassee, Florida 32301. Located in the County of Leon.

**ARTICLE VII INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is Business Filings Incorporated, Mark Schiff AVP, 8025 Excelsior Dr, Suite 200, Madison, WI 53717.

\*\*\*\*\*

I hereby accept the appointment as registered agent and agree to act in this capacity.

Signature: Mark Schiff

Business Filings Incorporated

Date 9/16/2003

Signature: Mark SchiffBusiness Filings Incorporated, Incorporator  
Mark Schiff, AVP

Date 9/16/2003

The document was prepared by: Business Filings Incorporated, Mark Schiff, 8025 Excelsior Dr, Suite 200, Madison, WI 53717. 608-827-5300

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