

P040000 38775

(Requestor's Name)

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(City/State/Zip/Phone #)

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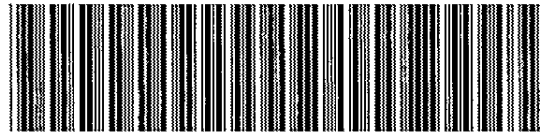
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. Dental Group of Miami P.A.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF  
DENTAL GROUP OF MIAMI P.A.**

The undersigned incorporator, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

**ARTICLE I - NAME**

The name and address of this corporation shall be:

DENTAL GROUP OF MIAMI P.A.  
4500 NW 7 Street  
Miami, FL 33126

**ARTICLE II - EXISTANCE**

The corporation shall have perpetual existence.

**ARTICLE III - PURPOSE OF CORPORATION**

The corporation may transact any or all-lawful business for which corporations may be incorporated under the laws of the State of Florida and of the United States. Practice of Denistry

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares that the corporation shall have authority to issue is 100 shares of common stock having \$ 1.00 par value.

**ARTICLE V - PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorata share there of (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VI - NAME OF REGISTERED  
AGENT AND ADDRESS OF REGISTERED OFFICE**

The name and street address of the corporation's initial registered resident agent shall be:

Jose Calvo  
4500 NW 7 Street  
Miami, FL 33126

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#### **ARTICLE VII - INITIAL BOARD OF DIRECTORS**

Initially this corporation shall have two directors. The number of directors may be either increased or diminished from time to time by the by-laws but shall never be less than one. The name and address of the initial directors are:

Jose Calvo  
4500 NW 7 Street  
Miami, FL 33126

#### **ARTICLE VIII- INCORPORATOR**

The name and address of the person signing these articles is:

Jose Calvo  
4500 NW 7 Street  
Miami, FL 33126

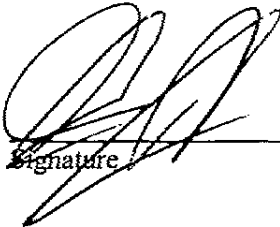
#### **ARTICLE IX – BY LAWS**

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of directors and shareholders.

#### **ARTICLE X - AMENDMENT**

The corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

The undersigned has (have) executed these Articles of Incorporation this February 24, 2004.

  
Signature

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

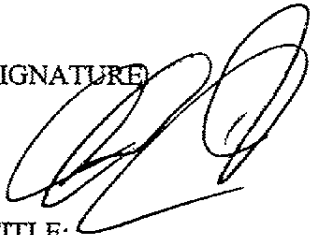
DENTAL GROUP OF MIAMI P.A.

2. The name and address of the registered agent and office is:

Jose Calvo  
4500 NW 7 Street  
Miami, FL 33126

Having been named to accept services of process for the above stated corporation, at the place designated in the certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

SIGNATURE



TITLE:

DATE: 02/24/04

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