

P04000114444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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07/28/04--01014--002 \*\*78.75

04 AUG -5 01:05:53

SECRET  
DIVISION

1204-28850

## TRANSMITTAL LETTER

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

SUBJECT: MORI.CORP

(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. JOEBETH MOLERO

Name (Printed or typed)

7826 NW 121 WAY

Address

PARKLAND, FLORIDA

City, State & Zip

(954) 341-5796

Daytime Telephone number

04 AUG -5 AM 10:53

STATION  
DIVISION  
RECEIVED

**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)

### ARTICLE I NAME

The name of the corporation shall be:

~~MOLETO~~ MOLERO-RIVERA, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O Box 9585  
Coral Springs, Florida 33075

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Practice Dentistry

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joebeth Molero

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


7826 NW 121 WAY  
Parkland, Florida 33076  
Joebeth Molero

### ARTICLE VII INCORPORATOR

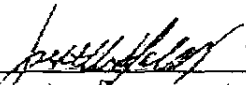
The name and address of the Incorporator is:

Joebeth Molero  
7826 Nw 121 Way  
Parkland, Florida 33076

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

07/26/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

07/26/04  
\_\_\_\_\_  
Date

04 AUG -5 AM 10:53  
SECRET  
DIVISION OF REVENUE