P05000023704

(Requestor's Name)				
1938 Hiale	Lopez, D.M.D. West 60th St. ah, FL 33012 5-556-0155			
(City/	State/Zip/Phone	#)		
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 31, 2005

JOSE LOPEZ, D.M.D. 1938 WEST 60TH ST HIALEAH, FL 33012

SUBJECT: JOSE LOPEZ DMD PA Ref. Number: W05000004937

We have received your document for JOSE LOPEZ DMD PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Letter Number: 705A00006752

Valerie Ingram Document Specialist New Filings Section

TRANSMITTAL LETTER

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

SUBJECT:	JOSE LOPEZ DMD	PA	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:
□ \$70.00	₹2 \$78.75	\$78.75	\$87.50
Filing Fee Filing Fee		Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of Status
		ADDITIONAL CO	
FROM:	Jose F. Lopez-Lle	oreda	<u>.</u>
Name (Printed or typed)			
	1938 West 60th St	reet	
Address			
	Hialeah, FL. 33	012	
		State & Zip	<u> </u>
	(305) 556-0155	· · ·	-0156fax
	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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ARTICLE I NAME

The name of the corporation shall be:

Jose Lopez DMD PA

The production of the producti

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1938 West 60th Street

ARTICLE III **PURPOSE** Hialeah, FL. 33012

The purpose for which the corporation is organized is:

Dental Office Business

ARTICLE IV SHARES

The number of shares of stock is:

10,000

INITIAL OFFICERS AND/OR DIRECTORS

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

Jose F. Lopez-Lloreda 1938 West 60th Street Hialeah, FL. 33012

President/Secretary/Tresurer

REGISTERED AGENT ARTICLE VI

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

Sergio Ponton 1013 S.W. 67th Avenue Miami. FL. 33144

ARTICLE VII INCORPORATOR

The <u>name</u> and address of the Incorporator is:

Jose F. Lopez-Lloreda 1938 West 60th Street Hialeah, FL. 33012

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

<u>3 - 8 - 05</u> Date

2-7-05 Date