

PD5000063790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

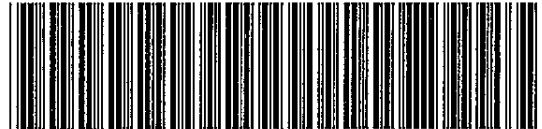
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400051088204

04/27/05--01050--005 \*\*87.50

Seal of the State of Florida  
TALLAHASSEE, FLORIDA

2005 APR 27 P 3:45

FILED

D. WHITE MAY -2 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** BARCELO-MARIN DENTAL ASSOCIATES, 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:** DARLENE FERNANDEZ CARUS, ESQUIRE

Name (Printed or typed)

370 MINORCA AVENUE, SUITE 14

Address

CORAL GABLES, FLORIDA 33134

City, State & Zip

(305) 460-0180

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

**OF**

**BARCELO-MARIN DENTAL ASSOCIATES, INC.**

**FILED**

2005 APR 27 P 3:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation for profit under the laws of the State of Florida, hereby adopts the following Articles of Incorporation:

**ARTICLE I**

The name of the corporation is BARCELO-MARIN DENTAL ASSOCIATES, INC.

**ARTICLE II**

The maximum number of shares of stock which the corporation is authorized to issue and have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 per share.

**ARTICLE III**

The purpose of this corporation shall be to conduct any and all lawful businesses authorized by the State of Florida.

**ARTICLE IV**

The existence of the corporation shall be perpetual. Corporate existence shall commence on the date these Articles are executed and acknowledged, except that if they are not filed by the Department of State of the State of Florida within five (5) days, exclusive of legal holidays, after they are executed and acknowledged, corporate existence shall commence upon filing by the Department of State.

#### ARTICLE V

The initial registered agent of the corporation is Darlene Fernandez Carus,  
Esquire, 370 Minorca Avenue, Suite 14, Coral Gables, Florida.

#### ARTICLE VI

The principal place of business and mailing address of the corporation is located  
at 330 S.W. 27<sup>th</sup> Avenue, Unit 501, Miami, Florida 33135.

#### ARTICLE VII

The name and street address of the initial members of the first Board of Directors  
of the corporation are:

<u>Name</u>	<u>Address</u>
Rita F. Marin	2501 S.W. 37 <sup>th</sup> Avenue, #801 Miami, FL 33133

#### ARTICLE VIII

The name and street address of the Officers of the corporation who shall hold  
office for the first year of the corporation's existence or until a successor is elected and  
has qualified is:

<u>Name</u>	<u>Address</u>
Rita F. Marin	2501 S.W. 37 <sup>th</sup> Avenue, #801 President/Treasurer Miami, FL 33133

#### ARTICLE IX

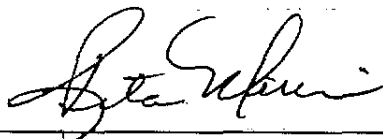
The name and street address of each incorporator signing these Articles is:

<u>Name</u>	<u>Address</u>
Rita F. Marin	2501 S.W. 37 <sup>th</sup> Avenue, #801 Miami, FL 33133

ARTICLE X

This corporation reserves the right to amend or repeal any provision contained these Articles of Incorporation, and any right conferred upon the shareholders is subject to this reservation.

EXECUTED at Miami, Miami-Dade County, Florida this 25<sup>th</sup> day of April, 2005.



RITA F. MARIN

STATE OF FLORIDA                     )  
  ) SS  
COUNTY OF MIAMI-DADE         )

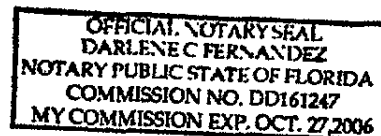
The foregoing instrument was acknowledged before me this 25<sup>th</sup> day of April, 2005, by Rita F. Marin who is personally known or who has provided \_\_\_\_\_ as identification.



Notary Public, STATE OF FLORIDA

Print Name:

My Commission Expires:



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

Pursuant to the provisions of Section 621, Florida Statutes, the undersigned corporation, organized under the State of Florida, submits, organized under the statement in designating the registered office / registered agent, in the State of Florida.

First that BARCELO-MARIN DENTAL ASSOCIATES, INC., desiring to organize under the Laws of the State of Florida with its principal offices, as indicated in the Articles of Incorporation has named DARLENE FERNANDEZ CARUS, ESQ., located at 370 Minorca Avenue, Suite 14, City of Coral Gables, County of Miami-Dade, State of Florida, at its agent to accept service of process within the State.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT, AND AGREE TO ACT IN THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
REGISTERED AGENT

**FILED**  
2005 APR 21 P 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA