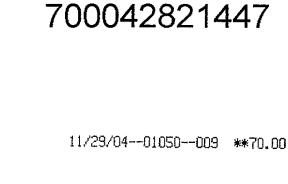
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TRANSMITTAL LETTER

فرو مشو ما کی ا

2005 MAY 17 AM 9:48

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

TALLAHASSEE FLORIDA

SUBJECT: <u>van</u>	DYKE DENTAL ASSOCI (PROPOSED CORPORA	ATES, P.A.	TIME ATTEMENT
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	RICHARD M. LENNON	4	
	Name	(Printed or typed)	
	16562 N. DALE MABRY	HIGHWAY	
	Address		
	TAMPA, FL 33618		
	City, State & Zip		
•	(813) 269-9115		

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

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

2005 MAY 17 AM 9:48

TALLAHASSEE FLORIDA

May 2, 2005

VAN DYKE DENTAL ASSOCIATES P.A. ATTN: LESLIE 16562 N. DALE MABRY HIGHWAY TAMPA, FL 33618

SUBJECT: VAN DYKE DENTAL ASSOCIATES P.A.

Ref. Number: W05000021876

We have received your document for VAN DYKE DENTAL ASSOCIATES P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):—ATTACHED.

The document must state the number of shares of authorized stock.

Please list the street address of each officer/director.

The registered agent must sign accepting the designation.

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) 245-6973.

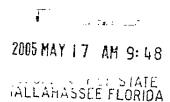
Claretha Golden Document Specialist New Filings Section

Letter Number: 405A00030860





Secretary of State



December 6, 2004

RICHARD M. LENNON 3953 VAN DYKE ROAD LUTZ, FL 33558

SUBJECT: VAN DYKE DENTAL ASSOCIATES P.A.

Ref. Number: W04000044405

We have received your document for VAN DYKE DENTAL ASSOCIATES P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please list the street address of each officer/director.

The registered agent must sign accepting the designation.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2005 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 204A00068169

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2005 MAY 17 AM 9: 48

ARTICLE I NAME

The name of the corporation shall be:

VAN DYKE DENTAL ASSOCIATES, P.A.

FALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3953 VAN DYKE ROAD LUTZ, FL 33558 MAILING ADDRESS: 16562 N. DALE MABRY HIGHWAY TAMPA, FL 33618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DENTAL/MEDICAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RICHARD M. LENNON, DMD, PRES. 16562 N. DALE MABRY HIGHWAY TAMPA, FL 33618

ARTICLE VI REGISTERED AGENT

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

RICHARD M. LENNON 16562 N. DALE MABRY HIGHWAY TAMPA, FL 33618

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RICHARD M. LENNON 16562 N. DALE MABRY HIGHWAY TAMPA, FL 33618

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

Oate |

Signature/Incorporator

5/11/8

Date