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2005 MAY 17 AM 9:48
TALLAHASSEE FLORIDA

5/18/05

TRANSMITTAL LETTER

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

2005 MAY 17 AM 9:48

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: VAN DYKE DENTAL ASSOCIATES, P.A.
(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: RICHARD M. LENNON
Name (Printed or typed)

16562 N. DALE MABRY HIGHWAY
Address

TAMPA, FL 33618
City, State & Zip

(813) 269-9115
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

2005 MAY 17 AM 9:48

FLORIDA DEPARTMENT OF STATE
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

RECEIVED
05 MAY 17 AM 10:35
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

2005 MAY 17 AM 9:48

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

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

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)

ARTICLE I NAME

The name of the corporation shall be:

VAN DYKE DENTAL ASSOCIATES, P.A.

2005 MAY 17 AM 9:48

STATE OF FLORIDA
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling 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 name and Florida street address (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

Richard M. Lennon
Signature/Registered Agent

5/11/05
Date

Richard M. Lennon
Signature/Incorporator

5/11/05
Date