

P06000002489

(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:

Albert Eaton GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Article VI + VII  
DATE 1/9/06  
DOC. EXAM MRD

Office Use Only



200062516702

01/05/06 10:16:04 \*\*/8,15

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 JAN - 5 AM 10:30

MRD  
1/9/06

***Albert C. Eaton***  
*Attorney and Counselor at Law*  
1516 East Colonial Drive, Suite 100E  
Orlando, Florida 32803

*Mailing Address:*  
Post Office Box 530054  
Orlando, Florida 32853-0054

*Telephone*  
(407) 843-8100  
*Telecopier*  
(407) 897-6986

January 3, 2065

Florida Department of State  
Division of Corporations  
Corporate Filings  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Articles of Incorporation  
Amani Alkhairi, D.M.D., P.A.

Dear Sir:

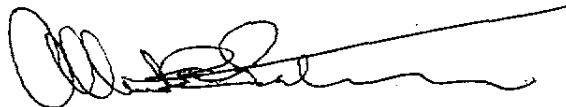
Enclosed are original and one copy of the Articles as above captioned, and our check in the amount of \$78.75, representing:

Filing Fee	\$35.00
Resident Agent Designation	\$35.00
Certified Copy	\$ 8.75

When the Articles have been processed, we would appreciate the return of the certified copy to our attention.

Thank you for your consideration in this matter.

Sincerely,



Albert C. Eaton

ACE/as  
Enclosures

06 JAN -5 AM 10: 30

ARTICLES OF INCORPORATION  
OF  
AMANI ALKHAIRI, D.M.D., P.A.

The undersigned incorporator, who is licensed or otherwise legally authorized to practice the profession of dentistry in the State of Florida, associates herself with the intention of forming a professional corporation in accordance with the Florida Professional Service Corporation and Limited Liability Company Act, and adopts the following articles of incorporation for the corporation;

ARTICLE I

NAME

The name of the Corporation is:

AMANI ALKHAIRI, D.M.D., P.A.

ARTICLE II

DURATION

This Corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE III

PURPOSE OR PURPOSES

The purpose or purposes for which this Corporation is organized are as follows:

- (a) To engage in the practice of dentistry as a professional corporation and to own and operate a dental office for the purposes of providing dental care and treatment.

(b) To treat, prescribe, diagnose, or operate for any disease, pain, injury, deficiency, deformity or physical condition of human teeth, gums, jaws, and adjacent tissues.

(c) To furnish, construct, reproduce, or repair prosthetic dentures or bridges to be used and worn as substitutes for natural teeth.

(d) Any and all other matters and/or procedures associated with the practice of general dentistry.

The purposes of this corporation shall be carried out only through officers, employees, and agents, each of whom is licensed or otherwise legally qualified to render professional dental services in the State of Florida.

#### ARTICLE IV

##### CAPITALIZATION

The aggregate number of shares, which the Corporation is authorized to issue or have outstanding at any one time, is one hundred (100) shares. Such shares shall be of a single class designated as "Common Stock" and shall have a par value of ONE HUNDRED DOLLARS (\$100.00) per share.

#### ARTICLE V

##### INITIAL REGISTERED OFFICE, AGENT AND PRINCIPAL OFFICE

The street address of the initial registered agent of the Corporation is 1119 Chateau Circle, Minneola, Florida 34715 and the name of its initial registered agent at such address is AMANI ALKHAIRI. The street address of the initial principal office of the Corporation is 1119 Chateau Circle, Minneola, FL 34715.

ARTICLE VI

DIRECTORS

The Corporation shall have one (1) director initially. The number of directors may be increased or decreased from time to time by the By-Laws. The name and address of each person who is to serve as a member of the initial board of directors is:

<u>Name</u>	<u>Address</u>
Amani Alkhairi	1119 Chateau Circle Minneola, FL 34715

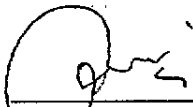
ARTICLE VII

INCORPORATORS

The name and address of each person signing these Articles of Incorporation as an incorporator is:

<u>Name</u>	<u>Address</u>
Amani Alkhairi	1119 Chateau Circle Minneola, FL 34715

Executed by the undersigned at Orlando, Orange County, Florida, on the 30<sup>th</sup> day of December, 2005.

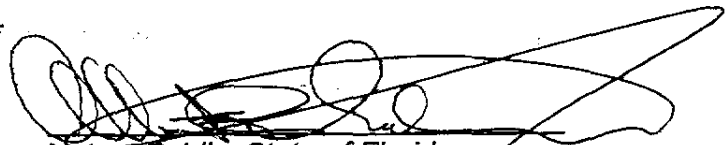


AMANI ALKHAIRI  
Incorporator

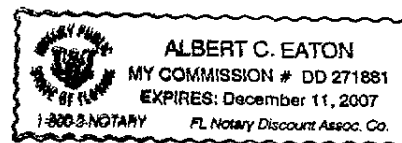
STATE OF FLORIDA  
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day before me, an officer duly authorized to take acknowledgments and oaths, personally appeared AMANI ALKHAIRI, who is personally known to me or who has produced R/B as identification, who did not take an oath, who executed the foregoing and acknowledged before me that she executed the same freely and voluntarily for the purposes therein expressed.

WITNESS MY HAND and official seal in the County and State aforesaid, this 30<sup>th</sup> day of December, 2005.

  
Notary Public, State of Florida  
Albert C. Eaton  
Printed Name

My Commission Expires:



ACCEPTANCE BY REGISTERED AGENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 JAN -5 AM 10:30

I hereby accept the designation of initial Registered Agent of AMANI ALKHAIRI, D.M.D., P.A.; that I am familiar with the obligations of that position, and I agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.



---

AMANI ALKHAIRI  
1119 Chateau Circle  
Minneola, FL 34715