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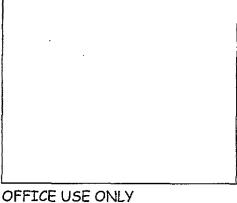
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WALK-IN

### ENTITY NAME:

1. AFFORDABLE DENTURES - PORT ST. LUCIE, P.A.

CK# 66186

AMOUNT \$78.75

PLEASE FILE THE ATACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

57	TAM	PFN	COPY

CERTIFICATE OF STATUS

# COVER LETTER

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

(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
nal and one (1) copy of the artic	cles of incorporation and	I a check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
Name (Printed or typed)  4990 Hww 70 West		
Kinston, NC 2	Address 28504 State & Zip	
	Filing Fee & Certificate of Status  Karen Frankli Name  4990 Hwy 70  Kinston, NC 2  City,	Filing Fee & Certificate of Status Filing Fee & Certified Copy  ADDITIONAL CO  Karen Franklin - Corporate

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

Daytime Telephone number

### ARTICLES OF INCORPORATION

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

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## SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

Affordable Dentures - Port St. Lucie, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9140 S. Federal Hwy Port St. Lucie, FL 34952

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in every aspect of the practice of dentistry. The professional services involved in the Corporation's practice of dentistry may be rendered only through its officers, agents and employees who are duly authorized and licensed to practice dentistry in the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

The aggregate number of shares that the Association shall be authorized to have is one Thousand (1,000) shares of common stock par value once cent (\$0.01)

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Martin D. Baloff, DDS, President - 9140 S. Federal Hwy., Port St. Lucie, FL 34952 George L. Edwards, Jr., Secretary - 4990 Hwy 70 West, Kinston, NC 28504

### ARTICLE VI REGISTERED AGENT

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

NRAI Services, Inc. 526 E. Park Avenue Tallahassee, FL 32301

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Martin D. Baloff, DDS - 9140 S. Federal Hwy., Port St. Lucie, FL 34952

Signature/Incorporato

Date