

Florida Department of State

Division of Corporations Public Access System

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FLORIDA PROFIT/NON PROFIT CORPORATION

pine island dental, inc.

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ARTICLES OF INCORPORATION OF

PINE ISLAND DENTAL, INC.

The undersigned incorporator, for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopts the following Article of Incorporation.

ARTICLE I

The name of this corporation shall be:

PINE ISLAND DENTAL, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is: 8350 State Road 84, Davie, FL. 33324.

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue are 1,000 shares having an individual par value of \$1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one class (1) class of stock of this corporation.

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ARTICLE VI

The name and street address of the initial Registered Agent of the this corporation shall be:

Thomas A Zurfluh 8850 State Road 84 Davie, FL 33324

ARTICLE VII

The name and address of the officers and initial board of director(s) shall be:

Thomas A Zurfluh
 President, Director

8850 State Road 84 Davie, FL 33324

ARTICLE VIII

The name and address of the incorporator executing these Article of Incorporation is:

Thomas A Zurfinh \$250 State Road 84 Davie, FL 33324

The undersigned has executed these Article of Incorporation this $\underline{6}^{\text{th}}$ day of March, 2006.

Thomas X Zurflub, Incorporator

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PINE ISLAND DENTAL INC. (Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEARBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS 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.

Signature.

Registered Agent

ROGHTERED AGENT NAME:

Thomas A Zurfluh

ADDRESS:

8850 State Road 84

CHTOR

DAVIE COUNTY OF:

BROWAND

STATE OF:

FLORIDA

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