

FD6000050978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

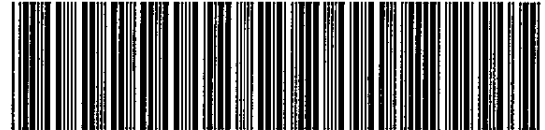
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600069301396

04/10/06--01017--013 \*\*87.50

FILED

2006 APR 10 P 4:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-10-06  
11:51

**COVER LETTER**

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

SUBJECT: FLORIDA DENTAL & DENTURE IV, INC.  
(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:

JUDITH ZOFI

Name (Printed or typed)

641 REINANTE AVE

Address

CORAL GABLES FL 33156

City, State & Zip

305-661-3813

Daytime Telephone number

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

**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: **FLORIDA DENTAL & DENTURE CENTER IV INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: **1622 NORTH FEDERAL HIGHWAY, LAKE WORTH FL. 33460**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **DENTAL SERVICES**

**ARTICLE IV SHARES**

The number of shares of stock is: **1**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
**YVES SEMEATH DIRECTOR / PRESIDENT**  
**1901 SOUTH FEDERAL HIGHWAY**  
**BUYNTON BEACH FL 33435**  
**JUDITH ZUFI TREASURER**  
**1901 SOUTH FEDERAL HWY**  
**BB 33435**

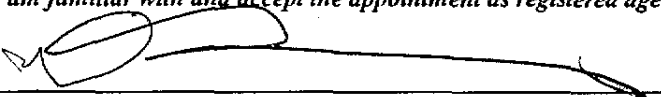
**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
**YVES SEMEATH**  
**1622 NORTH FEDERAL HIGHWAY**  
**LAKE WORTH FL 33460**

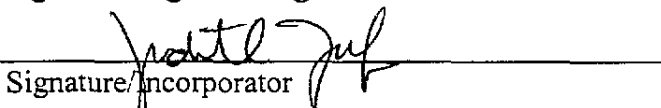
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
**JUDITH ZUFI**  
**641 REYNOLDS AVE**  
**CORAL GABLES FL 33156**

\*\*\*\*\*  
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

**4/7/00**  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

**4/7/00**  
\_\_\_\_\_  
Date