

PO6000072411

(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



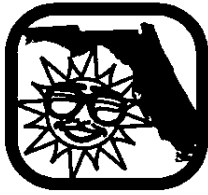
700073425497

05/03/06--01032--020 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 24 PM 1:46

W06-21237

B. McKnight MAY 24 2006



Florida Incorporators, Inc.

Mark S. Hankins
President
8875 Hidden River Pkwy Ste. 300
Tampa, FL 33637

April 28, 2006

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

RE: Family Dental Associates, P.A.

Dear Corporate Specialist:

Enclosed is an original and one (1) copy of the Articles of Incorporation for the above-referenced corporation, and funds of \$78.75 representing the filing fee for same.

Please do not hesitate to contact the undersigned if there are any questions or concerns.

Sincerely,

Mark Hankins
President



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2006

MARK HANKINS
FLORIDA INCORPORATORS INC
8875 HIDDEN RIVER PKWY STE 300
TAMPA, FL 33637

SUBJECT: FAMILY DENTAL ASSOCIATES, P.A.
Ref. Number: W06000021237

We have received your document for FAMILY DENTAL ASSOCIATES, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6931.

Becky McKnight
Document Specialist
New Filing Section

Letter Number: 806A00032487

Articles Of Incorporation
Of
All Smiles Family Dental, P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 24 PM 1:46

THE UNDERSIGNED, ACTING AS INCORPORATOR OF A PROFESSIONAL ASSOCIATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION:

FIRST: The name of the PROFESSIONAL ASSOCIATION is All Smiles Family Dental, P.A.

SECOND: The period of its duration is perpetual.

THIRD: The date and time of the commencement of the corporate existence shall be the date of the filing of these Articles by the Department of State.

FOURTH: The purpose or purposes for which the professional association is organized is to engage in the practice of dentistry and transaction of any or all lawful business for which the professional association may be incorporated under the provisions of the Florida Business Corporation Act.

FIFTH: The aggregate number of shares which the professional association shall have authority to issue is ONE THOUSAND (1,000) SHARES of capital stock, \$.001 par value each.

SIXTH: The number of directors constituting the initial Board of Directors of the professional association is ONE (1) and the name and address of the person who is to serve as director

until the first annual meeting of shareholders or until her successor is elected and qualified is:

Debbie-Ann Reynolds
5041 Hawks Hammock Way
Sanford, FL 32771

SEVENTH: The name and address of the incorporator is:

Mark Hankins
8875 Hidden River Pkwy Ste. 300
Tampa, FL 33637-2087


EIGHTH: The name and address of the initial registered agent and the initial registered office is:

Florida Incorporators, Inc.
8875 Hidden River Pkwy Ste. 300
Tampa, FL 33637-2087

NINTH: The mailing address and principal office of the professional association is:

All Smiles Family Dental, P.A.
5041 Hawks Hammock Way
Sanford, FL 32771

DATED: May 22, 2006



MARK HANKINS
Incorporator

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and responsibilities as registered agent of the professional association.

FLORIDA INCORPORATORS, INC.

By:



MARK HANKINS, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAY 24 PM 1:46