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To: Division of Corporations
 Fax Number : (850)205-0381

From:
 Account Name : FAS-T CORP. AGENTS, INC.
 Account Number : 071001002335
 Phone : (305)599-0839
 Fax Number : (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

DORAL DENTAL BOUTIQUE & SPA, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DORAL DENTAL BOUTIQUE & SPA, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: **DORAL DENTAL BOUTIQUE & SPA, INC.**

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue **One hundred** shares (100) of **five** Dollar (s) (\$ **5.00**) par value common stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

NAME	MARIE EVELYN ESTEFAN		
ADDRESS	8300 West Flagler St # 160		
CITY	MIAMI	STATE	FL ZIP 33144

The principal office, if known or the mailing address of the corporation is:

NAME	MARIE EVELYN ESTEFAN		
ADDRESS	8300 West Flagler St # 160		
CITY	MIAMI	STATE	FL ZIP 33144

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have **ONE (1)** director initially. The number of directors may be either increased or diminished from time to time by laws, but shall never be less than one (1).

The name and addresses of the initial director (s) of the corporation are as follows:

NAME	MARIE EVELYN ESTEFAN				
ADDRESS	8300 West Flagler St #160				
CITY	MIAMI	STATE	FL	ZIP	33144
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					

ARTICLE VII - INCORPORATORS

The name and addresses of the incorporators signing these Articles of Incorporation are as follows :

NAME	MARIE EVELYN ESTEFAN				
ADDRESS	8300 West Flagler St #160				
CITY	MIAMI	STATE	FLORIDA	ZIP	33144
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					
NAME					
ADDRESS					
CITY					

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 29 of JUNE, 2006.

PREPARED: SOSA ACCOUNTING TAX SERVICE
570 EAST 49 STREET
HIALEAH, FL 33013

(Signature) (Seal)

(305) 688 - 1716

_____ (Seal)

(305) 688 - 1714

_____ (Seal)

_____ (Seal)

_____ (Seal)

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

DORAL DENTAL BOUTIQUE & SPA, INC.

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, to organize under the laws of the State of Florida with Its
registered office as indicated in the Articles of Incorporation.

AT: 8300 West Flagler St #160

MIAMI, FL 33144

Has named MARIE EVELYN ESTEFAN

Located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above state
corporation at the place designated in this certificate, and being familiar with the
obligations of that position, I hereby accept to act in this capacity, and agree to comply
with provisions of Florida Law in Keeping open said office.

Marie Evelyn Estefan
(registered agent)

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