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# FLORIDA PROFIT/NON PROFIT CORPORATION

North Naples Dental, PA

Certificate of Status	1
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ARTICLES OF INCORPORATION

OF AUG 29

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business

Corporation Act, herby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

# North Naples Dental, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

North Naples Dental, PA 6903 Rain Lily Road, #201 Naples, FL 34109

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 SHARES at No Par Value

### ARTICLE IV PURPOSE

The purpose for which this corporation is/are formed, are as follows:

Dentistry To practice the profession of a(n):

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-518-935-3940

# ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Laura Van Varick 6903 Rain Lily Road, #201 Naples, FL 34109

## ARTICLES VI INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Laura Van Varick - President/Director 6903 Rain Lily Road, #201 Naples, FL 34109

# ARTICLES VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Laura Van Varick 6903 Rain Lily Road, #201 Naples, FL 34109

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

25th day of August 2006.

Laura Van Varick SIGNATURE

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: North Napl	les Dental, PA
2. The name and address of the registered agent and or	ffice is:
	Laura Van Varick
	Name G
	6903 Rain Lily Road, #201
(P.	O. Box or Mail Drop Box NOT Acceptable)
	Naples, FL 34109 (City / State / Zip)
Having been named as registered agent and to accomporation at the place designated in this certificangent and agree to act in this capacity. I further agrelating to the proper and complete performance cobligations of my position as registered agent.	ate, I hereby accept the appointment as registered gree to comply with the provisions of all the statutes

Laura Van Varick SIGNATURE August 25, 2006 (Date)