

## Florida Department of State

Division of Corporations Public Access System

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## FLORIDA PROFIT/NON PROFIT CORPORATION

AFFORDABLE DENTURES - WEST MELBOURNE, P.A.

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

Help

H06000262465

## **COVER LETTER**

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

SUBJECT: Affe	fordable Dentures - West Melbourne, P.A.			
		TE NAME – <u>MUST INCL</u>	. <del></del>	
Filing Fee	inal and one (1) copy of the art    \$78.75   Filing Fee   & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Karen Franklin - Corporate  Name (Printed or typed)  PO Box 1042  Address			
	City	1, NC 28503 , State & Zip 527-6121		
		Telephone number		

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

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION

27 AMII: 59 In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Affordable Dentures - West Melbourne, P.A.

ARTICLE II · PRINCIPAL OFFICE

The principal place of business/mailing address is:

1529 W. New Haven Avenue West Melbourne, FL 32904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in every aspect of the practice of dentistry. The professional services involved in the Corporation's practice of dentistry may be rendered only through its officers, agents, and employees who are duly authorized and licensed to practice dentistry in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The aggregate number of shares that the Association shall be authorized to have is one Thousand (1,000) Shares of common stock par value one cent (\$0.01)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Khaja Moinuddin, DDS - President - 1529 W. New Haven Avenue, West Melbourne, FL 32904 George L. Edwards, Jr. - Secretary - 4990 Hwy 70 West, Kinston, NC 28504

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

NRAI Services, Inc. 526 E. Park Avenue Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Khaja Moinuddin, DDS

1529 W. New Haven Avenue.

West Melbourne, FL 32904

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

Signature/Incorporator

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