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7. Styles WAR 5.3 SALL

COVER LETTER

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

SUBJECT: JASON BATTLE DDS, PA

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:	•	
\$70.00 Filing Fee	₹ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED		
FROM: G	LENN A. BATTLE		SECRETAR ALLAHASS	07 MAR 22	<u></u>
	Name	(Printed or typed)	THE OF		Ë
	9034 BELMONT		FLOI FLOI	AM 9:40	U
	A	Address	FLORIDA	0	
	SPRING HILL, FL 3460				
	City,	State & Zip			
!	914-866-3114				
	Daytime T	elephone 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:

JASON BATTLE DDS,PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

431 E.CENTRAL BLVD #211 ORLANDO.FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE QUALITY DENTAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

10

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

JASON BATTLE (President) 431 E. CENTRAL BLVD #211 ORLANDO, FL 32801

ARTICLE VI REGISTERED AGENT

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

GLENN A. BATTLE 9034 BELMONT SPRING HILL 34606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JASON BATTLE 431 E. CENTRAL #211 ORLANDO, FL 32801

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

Registered Agent

Signature/Incorporator