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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 MAY 22 AM 11: 21

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FLORIDA PROFIT/NON PROFIT CORPORATION

carlos m. valdes-sueiras, d.d.s., p.a.

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J. Shivers MAY 23 2007

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

CARLOS M. VALDES-SUEIRAS, D.D.S., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6705 S.W. Red Road
Suite # 404
Coral Gables, FL 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DENTIST'S OFFICE.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CARLOS M. VALDES-SUEIRAS: PRESIDENT, VICE-PRESIDENT & DIRECTOR.
6705 Red Road, Suite # 404, Coral Gables, FL 33143
PATRICIA E. VALDES-SUEIRAS: SECRETARY
6705 Red Road, Suite # 404, Coral Gables, FL 33143

ARTICLE VI REGISTERED AGENT

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

ANGELO R. POU, ESQ.
5795 S.W. 22nd. STREET
MIAMI, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARLOS M. VALDES-SUEIRAS, D.D.S.
6705 Red Road, Suite # 404, Coral Gables, FL 33143

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TALLAHASSEE, FLORIDA

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

Angelo R. Pou
Signature/Registered Agent
Carlos M. Valdes-Sueiras
Signature/Incorporator

5/21/07
Date
5/21/07
Date

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