

# Florida Department of State

Division of Corporations Public Access System

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## FLORIDA PROFIT/NON PROFIT CORPORATION

### AFFORDABLE DENTURES - HOMESTEAD, P.A.

Certificate of Status	0
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6/15/2007

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#### COVER LETTER

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

SUBJECT: Affordable Dentures - Homestead, P.A. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$78.75 **\$87.50** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Karen Franklin - Corporate FROM: \_ Name (Printed or typed) PO Box 1042 Address Kinston, NC 28503 City, State & Zip (252) 527-6121

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

Daytime Telephone number

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ARTICLES OF INCORPORATION	AT	TTCI	JES.	OF	IN	$COR^{\dagger}$	POR.	ATI	יוס
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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE! NAME

The name of the corporation shall be:

Affordable Dentures - Homestead, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

833 N. Homestead Blvd. Homestead, FL 33030-5024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in every espect 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 Y INITIAL OFFICERS AND/OR DIRECTORS

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

Harold Goodman, DDS - 833 N. Homestead Blvd, Homestead, Fi. 33030-5024

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

Tallahassoo, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Inconsorator is:

Harold Goodman, DDS - 833 N. Homestead Blvd., Homestead, FL 33030-5024

Having been named at 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,

All Means of

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Signaphyddingogoddaraidr

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