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(Requestor's Name)

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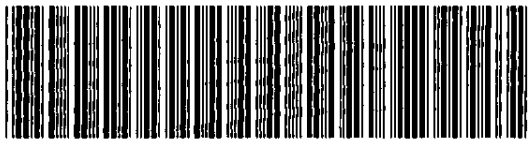
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Merger

TB 2-1-11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DERMATOLOGY AND COSMETIC CENTER, P.A.  
Name of Surviving Corporation

The enclosed Articles of Merger and fee are submitted for filing.

Please return all correspondence concerning this matter to following:

Dr. Igor Chaplik

Contact Person

Dermatology and Cosmetic Center

Firm/Company

5721 N.E. 27th Avenue

Address

Ft. Lauderdale, Fl. 33308

City/State and Zip Code

ichaplik@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Igor Chaplik

Name of Contact Person

At ( 954 )

772-0416

Area Code & Daytime Telephone Number

Certified copy (optional) \$8.75 (Please send an additional copy of your document if a certified copy is requested)

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



www.flskindocs.com

# Dermatology & Cosmetic Centers

October 12, 2010

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Dear Regulatory Specialist,

I am writing to send a corrected document for reference number P07000070679. Enclosed is the corrected document. Our office has already sent in the payment of \$148.75 for this document.

Please call me if there are any further questions.

Sincerely,

Kerry Zimmer  
Practice Administrator

enc.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 15, 2010

DR IGOR CHAPLIK  
DERMATOLOGY AND COSMETIC CENTER, P.A.  
5721 NE 27TH AVE  
FORT LAUDERDALE, FL 33308

SUBJECT: DERMATOLOGY AND COSMETIC CENTER, P.A.  
Ref. Number: P07000070679

We have received your document for DERMATOLOGY AND COSMETIC CENTER, P.A. and your check(s) totaling \$148.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please correct the corporation names to read exactly as on file with the Division of Corporation. Please complete the Plan of Merger.

The name of the entity must be identical throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 110A00024489



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 20, 2011

DR IGOR CHAPLIK  
DERMATOLOGY AND COSMETIC CENTER, P.A.  
5721 NE 27TH AVE  
FORT LAUDERDALE, FL 33308

SUBJECT: DERMATOLOGY AND COSMETIC CENTER, P.A.  
Ref. Number: P07000070679

We have received your document for DERMATOLOGY AND COSMETIC CENTER, P.A. and your check(s) totaling \$148.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The Articles of Merger must be signed by all of the corporations involved in the merger.

*Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.*

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 411A00001690

**ARTICLES OF MERGER**  
(Profit Corporations)

The following articles of merger are submitted in accordance with the Florida Business Corporation Act, pursuant to section 607.1105, Florida Statutes.

**First:** The name and jurisdiction of the surviving corporation:

<u>Name</u>	<u>Jurisdiction</u>	<u>Document Number</u> (If known/ applicable)
DERMATOLOGY AND COSMETIC CENTER, P.A.	Florida	P07000070

**Second:** The name and jurisdiction of each merging corporation:

<u>Name</u>	<u>Jurisdiction</u>	<u>Document Number</u> (If known/ applicable)
FORT LAWOODALE DERMATOLOGY & COSMETIC CENTER, P.A.	Florida	P05000056005
AVENTURA DERMATOLOGY AND COSMETIC CENTER, P.A.	Florida	P08000016795
BAY HARBOR DERMATOLOGY AND COSMETIC CENTER, PA	Florida	P07000111221
_____	_____	_____
_____	_____	_____

**Third:** The Plan of Merger is attached.

**Fourth:** The merger shall become effective on the date the Articles of Merger are filed with the Florida Department of State.

**OR** 10/1/2010 (Enter a specific date. NOTE: An effective date cannot be prior to the date of filing or more than 90 days after merger file date.)

**Fifth:** Adoption of Merger by surviving corporation - (COMPLETE ONLY ONE STATEMENT)

The Plan of Merger was adopted by the shareholders of the surviving corporation on Sept. 14, 2010.

The Plan of Merger was adopted by the board of directors of the surviving corporation on \_\_\_\_\_ and shareholder approval was not required.

**Sixth:** Adoption of Merger by merging corporation(s) (COMPLETE ONLY ONE STATEMENT)

The Plan of Merger was adopted by the shareholders of the merging corporation(s) on Sept. 14, 2010.

The Plan of Merger was adopted by the board of directors of the merging corporation(s) on \_\_\_\_\_ and shareholder approval was not required.

(Attach additional sheets if necessary)

2011 JAN 31 AM 11:08  
FILED  
SECRETARY OF STATE  
TALLAHASSEE  
FLORIDA

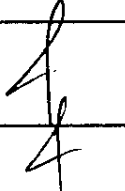
**Seventh: SIGNATURES FOR EACH CORPORATION**

Name of Corporation

Signature of an Officer or  
Director

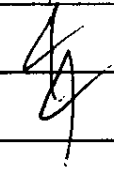
Typed or Printed Name of Individual & Title

FORT LAUDERDALE DERMATOLOGY  
& COSMETIC CENTER, P. A.



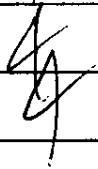
Igor Chaplik, Director

AVENTURA DERMATOLOGY  
AND COSMETIC CENTER, P. A.



Igor Chaplik, Director

BAY HARBOR DERMATOLOGY  
AND COSMETIC CENTER, PA



Igor Chaplik, Director

DERMATOLOGY AND  
COSMETIC CENTER, P. A.

Igor Chaplik, Director

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# PLAN OF MERGER

(Non Subsidiaries)

The following plan of merger is submitted in compliance with section 607.1101, Florida Statutes, and in accordance with the laws of any other applicable jurisdiction of incorporation.

**First:** The name and jurisdiction of the surviving corporation:

<u>Name</u>	<u>Jurisdiction</u>
<u>DERMATOLOGY AND COSMETIC CENTER, P.A.</u>	<u>Florida</u>

**Second:** The name and jurisdiction of each merging corporation:

<u>Name</u>	<u>Jurisdiction</u>
<u>FORT LAUDERDALE DERMATOLOGY &amp; COSMETIC CENTER, P.A.</u>	<u>Florida</u>
<u>AVENTURA DERMATOLOGY AND COSMETIC CENTER, P.A.</u>	<u>Florida</u>
<u>BAY HARBOR DERMATOLOGY AND COSMETIC CENTER, PA</u>	<u>Florida</u>
_____	_____
_____	_____

**Third:** The terms and conditions of the merger are as follows:

Shareholders of all authorized shares of merging corporations, and any rights appurtenant thereto, shall voluntarily surrender such shares, pro rata, to the surviving entity, in exchange for issuance to them of all authorized shares of surviving corporations, with no monetary consideration.

**Fourth:** The manner and basis of converting the shares of each corporation into shares, obligations, or other securities of the surviving corporation or any other corporation or, in whole or in part, into cash or other property and the manner and basis of converting rights to acquire shares of each corporation into rights to acquire shares, obligations, or other securities of the surviving or any other corporation or, in whole or in part, into cash or other property are as follows:

*(Attach additional sheets if necessary)*

Shareholders of merging corporations shall voluntarily surrender all authorized shares of such entities, and any rights appurtenant thereto, to surviving corporations, which shares shall be converted, pro rata into all authorized shares of surviving corporation, which shall be issued to surrendering shareholders, without additional consideration.