

P07000/10582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

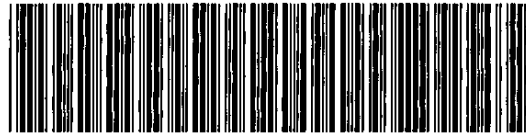
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/04/07--01041--002 \*\*78.75

FILED

07 OCT -4 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

KS

10/9/07

## COVER LETTER

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

SUBJECT: Fiddlesticks Dental Care, Inc

(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  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Devki Adi

Name (Printed or typed)

13962 Avon Park Circle

Address

Fort Myers, FL 33912

City, State & Zip

239-267-5622

Daytime Telephone 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:

FIDDLESTICKS DENTAL CARE, INC

FILED

07 OCT -4 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13650 FIDDLESTICKS BLVD, UNIT 200  
FORT MYERS, FL 33912

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DENTAL OFFICE

## ARTICLE IV SHARES

The number of shares of stock is: ~~500~~ 10

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEVKI ADI - 13962 AVON PARK CIRCLE, FORT MYERS, FL 33912

↳ INITIAL OFFICER

ASHISH ADI - 13962 AVON PARK CIRCLE, FORT MYERS, FL 33912

↳ DIRECTOR

## ARTICLE VI REGISTERED AGENT

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

DEVKI ADI

13962 AVON PARK CIRCLE

FORT MYERS, FL 33912

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

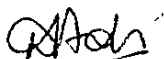
DEVKI ADI

13962 AVON PARK CIRCLE

FORT MYERS, FL 33912

\*\*\*\*\*

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

9-30-2007

Date



Signature/Incorporator

9-30-2007

Date