P07000126149

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
, , , , , ,			
PICK-UP WAIT MAIL			
- -			
(Dusiness Entitle Mens)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
·			
Special Instructions to Filing Officer:			
·			
·			





600112419286

11/21/07--01023--009 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 MOV 21 PM 1.: /

c.d. 11-26

COVER LETTER

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

SUBJECT: AZOV DENT, Inc		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l 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	& Certified Copy	& Certificate of
		Status
	ADDITIONAL CO	
	ADDITIONAL CO	PY KEQUIKED
Alovoi Mikorin		
FROM: Alexei Mikerin	(Printed or typed)	
Name	(Printed or typed)	
4519 Cherrybark Ct		
	Address	
Sarasota, FL 34241		
City,	State & Zip	
941-266-5779		
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:

AZOV DENT, Inc

FILED

2007 NOV 21 PH 4: 33

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2025 South McCall Road Englewood Florida,34223

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: investment and business

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alexei Mikerin, 4519 Cherrybark Ct Sarasota, FL 34241

ARTICLE VI REGISTERED AGENT

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

Margarita Galperina, 4519 Cherrybark Ct Sarasota, FL 34241

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Alexei Mikerin, 4519 Cherrybark Ct Sarasota, FL 34241

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in the vertificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity		
M. Galp	11/16/2007	
Signature/Registered Agent	Date	
4	11/16/2007	
Signature/incorporator	Date	