

PO8000017996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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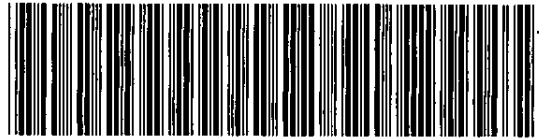
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Certificates of Status

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2112

COVER LETTER

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

SUBJECT: Timothy E. Mattingly DMD, 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
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: Timothy E. Mattingly DMD, P.A.

Name (Printed or typed)

6504 University Blvd.

Address

Winter Park, FL 32792

City, State & Zip

407 678 1600

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:

Timothy E. Mattingly DMD, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6504 University Blvd

Winter Park, Fl. 32792

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Dentistry

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Timothy E. Mattingly DMD

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Timothy E. Mattingly DMD
1630 Bryan Ave.
Winter Park, Fl. 32789

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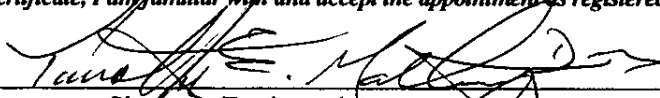
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Timothy E. Mattingly DMD
1630 Bryan Ave.
Winter Park, Fl. 32789

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



Signature/Incorporator

02-14-08

Date

02-14-08

Date