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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
7/10

COVER LETTER

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

SUBJECT: THOMAS A. DEVOL, 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: DOUGLAS M. SIEB, P.A.

Name (Printed or typed)

2191 Ringling Boulevard

Address

Sarasota, FL 34237

City, State & Zip

(941) 366-8855

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:

THOMAS A. DEVOL, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3839 Glen Oaks Manor Drive
Sarasota, FL 34232

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
the practice of the profession of Dentistry.

ARTICLE IV SHARES

The number of shares of stock is:
10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Thomas A. Devol - President, Vice President, Treasurer, and Secretary
3839 Glen Oaks Manor Drive
Sarasota, FL 34232

ARTICLE VI REGISTERED AGENT

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

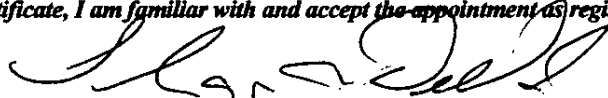
Thomas A. Devol
3839 Glen Oaks Manor Drive
Sarasota, FL 34232

ARTICLE VII INCORPORATOR

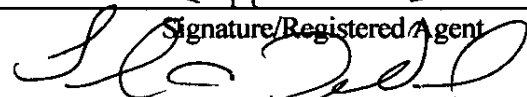
The name and address of the Incorporator is:

Thomas A. Devol
3839 Glen Oaks Manor Drive
Sarasota, FL 34232

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

FILED

08 JUL -9 PM 4: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/30/08

Date

6/30/08

Date