

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000176123 3)))



H08000176123ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

DIVISION OF CORPORATION

08 JUL 18 PM 3:12

RECEIVED

FLORIDA PROFIT/NON PROFIT CORPORATION

DENTAL CT INSTITUTE INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu


<https://efile.sunbiz.org/scripts/efilecovr.exe>SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JUL 18 PM 12:13

FILED

7/18/2008

H08000176123 3

**ARTICLES OF INCORPORATION
OF
DENTAL CT INSTITUTE INC**

The undersigned natural person, acting to form a corporation under the laws of the State of Florida, that provide for the formation of a corporation for profit, with the powers, rights, privileges and immunities hereinafter mentioned, do hereby make, subscribe, acknowledge and file with the Secretary of State of the State of Florida these Articles of Incorporation; and to that end set forth:

ARTICLE I

The name of the corporation shall be:

DENTAL CT INSTITUTE INC

ARTICLE II

The initial post office address of the principal office of the corporation in Florida will be:

7875 SW 104 ST #104
Miami, FL 33156

ARTICLE III

This corporation will engage and is empowered to engage in any business permitted under the laws of the United States of America and of the State of Florida.

ARTICLE IV

The Total number of shares of stock which this Corporation is authorized to have outstanding is defined as follows:

<u>Class</u>	<u>No. Shares</u>	<u>Par Value</u>
Common	7,500	\$ 1.00

Prepared by
Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156

H08000176123 3
985-271-3202

FILED
08 JUL 18 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V

The amount of capital this corporation will begin business with is:

FIVE HUNDRED DOLLARS (\$500.00)

ARTICLE VI

This corporation shall have perpetual existence.

ARTICLE VII

This corporation shall have **THREE** directors initially. The number of Directors may be increased or diminished from time to time, as provided by the By-Laws adopted by the stockholders.

ARTICLE VIII

The name and post office address of the member of the first Board of Directors of this corporation, and who shall hold office for the first year, or until their successor is chosen shall be:

Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156

Joshua Mongalo
7875 SW 104 ST #104
Miami, FL 33156

Janine Pallais
7875 SW 104 ST #104
Miami, FL 33156

ARTICLE IX

The name and address of the officers of the Corporation, who shall hold office until their successor is chosen, shall be:

Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156

President

Janine Pallais
7875 SW 104 ST #104
Miami, FL 33156

Secretary/Treasurer.

Miami, FL 33156

H08000176123 3

Joshua Mongalo
7875 SW 104 ST #104
Miami, FL 33156

Vice President

ARTICLE X

The initial registered agent and registered office of the corporation shall be:

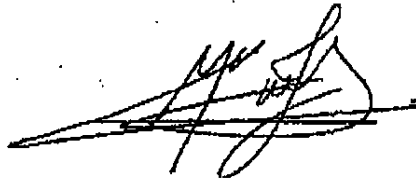
Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156

ARTICLE XI

These articles of incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by it to the stockholders, and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all of the directors and all the shareholders sign a written statement manifesting their intention that a certain amendment of these articles of incorporation be made.

IN WITNESS WHEREOF, the undersigned, being the sole incorporator of the corporation identified above, declare that I have examined the foregoing this 18th day of July of 2008, and do declare it to be true and correct.

Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156



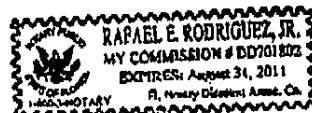
COUNTY OF DADE)
) SS:
STATE OF FLORIDA)

THIS IS TO CERTIFY that on this 18th day of July of 2008 before me, a notary public, personally appeared Virgilio Mongalo DMD who is personally known to me and who produced a Florida Drivers License and who I am satisfied is the person named as the sole incorporator and executor of the foregoing Articles of Incorporation, and who by his signature in my presence has acknowledged the same as his voluntary act.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal on this 18th day of July of 2008

Notary Public

H08000176123 3

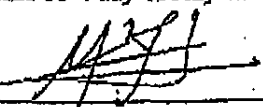


My commission expires

H08000176123 3

ACCEPTANCE OF REGISTERED AGENT APPOINTMENT

I, Virgilio Mongalo DMD, a natural person with an address 7875 SW 104 ST #104, Miami, FL 33156, do hereby accept the appointment of Registered Agent of DENTAL CT INSTITUTE INC on this 18th day of July of 2008.



Virgilio Mongalo DMD
7875 SW 104 ST #104
Miami, FL 33156

FILED
08 JUL 18 PM 12:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

H08000176123 3