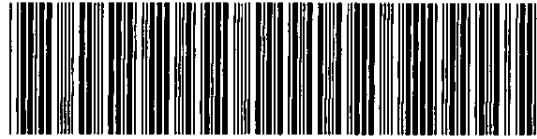


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

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1001 MARKET STREET
PHILADELPHIA PA 19102

COVER LETTER

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

SUBJECT: MARK C. ROSS, D.M.D., 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Mark C. Ross
Name (Printed or typed)

922 Rolling Acres Road, Suite 2
Address

Lady Lake, FL 32159
City, State & Zip

352-259-8284
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:

MARK C. ROSS, D.M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

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

922 Rolling Acres Road, Suite 2, Lady Lake, FL 32159

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide dental services to the public.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mark C. Ross, 922 Rolling Acres Road, Suite 2, Lady Lake, FL 32159, P/V/S/T/D

ARTICLE VI REGISTERED AGENT

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

Mark C. Ross, 922 Rolling Acres Road, Suite 2, Lady Lake, FL 32159

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mark C. Ross, 922 Rolling Acres Road, Suite 2, Lady Lake, FL 32159

ARTICLE VIII EFFECTIVE DATE

The effective date shall be November 28, 2008.

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

Mark C. Ross

Signature/Registered Agent

12-01-08

Date

Mark C. Ross

Signature/Incorporator

12-01-08

Date

FILED
08 DEC -2 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA