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i	(Requestor's Name)			
	(Address)			
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PICK-U	P WAIT MAIL			
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

RECEIVED DEPARTMENT OF STATE

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

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ः SUBJECT: Oakland	f Denture Center Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: <u>Oa</u>	ikland Denture Center Inc. Jose Name	eph_lole (Printed or typed)	
	512 W Oakland Park	Address	
	Wilton Manors FL 33311 City	, State & Zip	
	954-561-1614 Please re submit Daytime 1	Ref: W08000053223	

NOTE: Please provide the original and one copy of the articles.



November 25, 2008

DR. ROBERT HOLTZ 512 W. OAKLAND PK WILTON MANORS, FL 33311

SUBJECT: OAKLAND DENTAL CTR.

Ref. Number: W08000053223

We have received your document for OAKLAND DENTAL CTR. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must have a Florida street address. A post office box is not acceptable.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2009 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

If you have any further questions concerning your document, please call (850) 245-6062.

Eula Peterson Regulatory Specialist II New Filing Section

D' ' AG A' DO DOV COOR MILL DI LL COOL

Letter Number: 608A00058459



January 16, 2009

DR. ROBERT HOLTZ 512 W. OAKLAND PK WILTON MANORS, FL 33311

SUBJECT: OAKLAND DENTAL CENTER INC.

Ref. Number: W08000053223

We have received your document for OAKLAND DENTAL CENTER INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Letter Number: 608A00058459

Maryanne Dickey Document Specialist Supervisor New Filing Section

SECHE TARY OF STATE OF STATE OF CORPORATION

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:

Oakland Denture Center Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 512 W Oakland Park

Wiltor Manor, FL 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Denture/ Dental Center

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Robert Holtz D.M.D Officers 512 W Oakland Park Wilton Manor, FL 33311

ARTICLE VI REGISTERED AGENT

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

Robert Holtz 512 W Oakland Park Wilton Manor, FL 33311

ARTICLE VII INCORPORATOR

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

512 W Oakland Park Wilton manors FL 33311

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

2///09

Date

Date