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Florida Department of State
Division of Corporations
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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

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FLORIDA PROFIT/NON PROFIT CORPORATION

HQ PROSTHODONTICS, PA

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

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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:

HQ PROSTHODONTICS, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1865 BRICKELL AVENUE, APT# A908
MIAMI, FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR DENTAL AND SURGICAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1000 @ NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

HERNAN E. QUINTERO, DIRECTOR
1865 BRICKELL AVENUE, APT # A908
MIAMI, FL 33129

ARTICLE VI REGISTERED AGENT

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

JIRON & COMPANY, CPA, PA
5200 SW 8TH STREET #120
CORAL GABLES, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HERNAN E. QUINTERO
1865 BRICKELL AVENUE, APT # A908
MIAMI, FL 33129

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

Date

Date

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TALLAHASSEE, FLORIDA

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