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2009 JUL -7 P 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

JUL -8 2009  
D. A. WHITE

## TRANSMITTAL LETTER

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

**SUBJECT:**

**Boca Raton Prosthodontics, PA**  
(Proposed Corporation name - must include suffix)

Enclosed is 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:**

**Aaron E. Sheinfeld, DDS, DMD**  
Name

**44 Broadlawn Park, Apt#16**  
Address

**Chestnut Hill, MA 02467**  
City, State & Zip

\_\_\_\_\_(617) 283-0963\_\_\_\_\_  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION  
OF**

**Boca Raton Prosthodontics, PA**

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

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TALLAHASSEE, FLORIDA

**ARTICLE I. NAME**

The name of the corporation shall be:

**Boca Raton Prosthodontics, PA**

The address of the principal office of this corporation shall be:

**7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

and the mailing address shall be the same.

**ARTICLE II. NATURE OF BUSINESS**

This corporation may engage or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation, including but not limited to the practice of dentistry and to engage in every phase and aspect of the business of rendering the same professional services to the public that a dentist duly licensed under the laws of the State of Florida is authorized to render, but such professional services shall be rendered only through officers, employees and agents who are duly licensed under the laws of the State of Florida to practice dentistry therein.

**ARTICLE III. CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares of common stock have \$1 par value per share.

**ARTICLE IV. ADDRESS**

The street address of the initial registered office of the corporation shall be 7301A W. Palmetto Park Rd. Suite 201C Boca Raton, Florida 33433, and the name of the initial registered agent of the corporation at that address is Aaron E. Sheinfeld, DDS, DMD. Said agent shall indicate acceptance of said designation by executing these Articles of Incorporation where indicated.

**ARTICLE V. TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE VI. DIRECTORS**

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The names and street addresses of the initial member of the Board of Director is:

**Aaron E. Sheinfeld, DDS, DMD  
7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

**ARTICLE VII. OFFICERS**

The names and addresses of the initial officers of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

**Aaron E. Sheinfeld, DDS, DMD, President  
7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

**Aaron E. Sheinfeld, DDS, DMD, Vice President  
7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

**Aaron E. Sheinfeld, DDS, DMD, Secretary  
7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

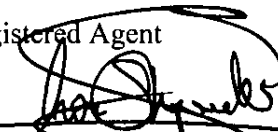
**ARTICLE VIII. INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is:

**Aaron E. Sheinfeld, DDS, DMD  
7301A W. Palmetto Park Rd. Suite 201C  
Boca Raton, Florida 33433**

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.

Registered Agent

  
Aaron E. Sheinfeld, DDS, DMD

07/03/09

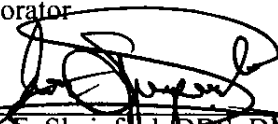
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Incorporator

  
Aaron E. Sheinfeld, DDS, DMD

07/03/09

Date

STATE OF MASS

COUNTY OF Middlesex

The foregoing instrument was acknowledged before me this 3rd day of July, 2009,  
Aaron E. Sheinfeld, DDS, DMD., who is personally known to me or who has produced his  
MASS driver's license as identification.

Notary Public, State of MASS, at Large

My Commission expires: Aug 3, 2012

Kjindal

