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Florida Department of State Division of Corporations

C/O: Becky McKnight Regulatory Specialist II New Filing Section

Ref #: W10000018392 Letter #: 710A00009302

This letter is to inform you that I do not have any intention of re-instating the administratively admonished corporation of Darren R. Pike D.M.D, M.S., P.A. I will be forming the new corporation of Darren R. Pike M.S., D.M.D., P.A. due to the correct title of my name.

Thank You,

Darren Pike

10 APR 29 AH II. L.

COVER LETTER

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

SUBJECT:	DARREN R. PIKE, M.S., D.M.D.,P.A. (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d 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
		ADDITIONAL CO	OF T REQUIRED
	. •		
FROM: DA	RREN R. PIKE, M.S.,D.M.D		
	Nam	e (Printed or typed)	
<u>136</u>	6 SW 12TH AVE		
		Address	
<u>BO0</u>	CA RATON, FL 33486 City,	State & Zip	
954	263-5536 Daytime 1	Celephone number	
GAT	ORDP@HOTMAIL.COM E-mail address: (to be use	d for future annual report	notification)

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



April 15, 2010

DARREN R PIKE MS DMD 1366 SW 12TH AVE BOCA RATON, FL 33486

SUBJECT: DARREN R. PIKE, M.S., D.M.D., P.A.

Ref. Number: W10000018392

We have received your document for DARREN R. PIKE, M.S., D.M.D., P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6931.

Letter Number: 710A00009302

Becky McKnight Regulatory Specialist II New Filing Section

www.sunbiz.org

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: DARREN R. PIKE, M.S., D.M.D, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1366 SW 12TH AVE BOCA RATON, FL 33486

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INDEPENDENT CONTRACTOR FOR DENTAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DARREN R.

1366 SW 12TH PRESIDENT

PIKE.

AVE BOCA

M.S.,D.M.D

RATON, FL 33486

ARTICLE VI

REGISTERED AGENT

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

JEFFREY C. PUMA 6550 N FEDERAL HWY STE 522 FT. LAUDERDALE, FL 33308

ARTICLE VII INCORPORATOR

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

DARREN R. PIKE, M.S., D.M.D.

1366 SW 12TH AVE BOCA RATON, FL 33486

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