

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000237526 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP

Account Number : I20100000009

Phone

: (305)599-0839

Fax Number

: (305)592-9591

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION RACHELLE D. WELLS, D.M.D., P.A.

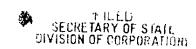
Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

9/29/2011



2011 SEP 29 PM 2: 18

ARTICLES OF INCORPORATION

OF

RACHELLE D. WELLS, D.M.D., P.A.

ARTICLE I - NAME

The name of this corporation shall be:

RACHELLE D. WELLS, D.M.D., P.A.

ARTICLE II - NATURE OF BUSINESS

The general nature of the business to be transacted by this corporation is:

To engage in services and activities associated with the general practice of dentistry.

To engage in any other lawful business, to purchase, or otherwise acquire, and to own, mortgage, pledge, sell, convey, assign, transfer, or otherwise dispose of, and to invest in and hold real or personal property, of every class, kind, and description, and to otherwise engage in any legal business or activity permitted under the laws of the State of Florida and in all other States and counties.

To conduct said business in, have one or more offices in, and buy, hold, mortgage, sell, convey, lease or otherwise dispose of real and personal property, including franchises, patents, copyrights, trademarks, and license in the State of Florida and in all other States and countles.

To contract debts and borrow money, issue and eeil or pledge bonds, debentures, notes and other evidence of indebtedness, and execute such mongages and transfers of corporate indebtedness as required.

To purchase the corporate assets of any other corporation and engage in the same or other character of business.

To guarantee, encorse, purchase, hold, sell, mortgage, transfer, pledge or otherwise acquire or dispose of the shares of the capital stock of, or any bonds, securities, of any other corporation of the State of Fiorida or any other State or Government, and while owner of such stock to exercise all of the rights, powers, and privileges of ownership, including the right to vote such stock.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares at no par value,

ARTICLE IV - PREEMPTIVE RIGHT

Holders of the common stock shall have the right to subscribe and purchase their pro rata shares of any new common stock which may be issued by the corporation.

ARTICLE V - TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI - PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation shall be at 200 Old Pond Drive, Kingsland, GA 31548.

ARTICLE VII - INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent Ronald A. McBride, 320 Osceola Avenue, Jacksonville Beach, FL 32250

ARTICLE VIII - DIRECTOR

This corporation shall not have more than one (1) director initially. The number of directors may be increased or diminished from time to time by ByLaws adopted by the stockholders.

ARTICLE IX - INITIAL DIRECTOR AND OFFICERS

The name and address of the Initial Director and Officers are:

NAME

ADDRESS

Rachelle D. Wells

200 Old Pond Drive Kingsland, GA 31548

D/P/T/S

ARTICLE X - INCORPORATOR

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

NAME

ADDRESS

Rachelle D. Wells

200 Old Pond Drive Kingsland, GA 31548

ARTICLE XI - AMENDMENTS

These Articles of incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at stockholders' meeting by a majority of the stockholders entitled to vote thereon, unless all the Directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made.

ARTICLE XII - SPECIAL PROVISION

It is the intent of the incorporator that the corporation will qualify under Section 1244 of the Internal Revenue Code and that the corporation will file as a Subchapter S corporation.

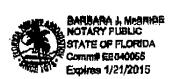
ARTICLE XIII - EFFECTIVE DATE

These Articles of Incorporation shall be effective on the date of filing.

Rachelle D. Wells incorporator

STATE OF FLOR DA COUNTY OF DUVAL

I HEREBY CERT FY that on this day, before me, a Notery Public, duly authorized in State and County named above to take acknowledgments, personally appeared Rachelle D. Wells to me, known to be the person described as subscribed in and executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to those Articles of Incorporation.



Notary Public Rankaue (Afficiale My Commission Expires: 1 21 2015

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.051, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:

RACHELLE D. WELLS, D.M.D., P.A.

The name of the Ragistered Agent and address of the Office Is:

Ronald A. McBride
320 Osceola Avenue
Jacksonville Beach, FL 32250

SIGNATURE

TITLE

Enrolled Agent

DATE

PROMED TO MELLS, D.M.D., P.A.

PROMED TO MELLS, D.M.D., P.A.

Title Enrolled Agent

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE TO SOLO HITT. See ea Roffald A. McBride

DATE 9/28//