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W12-11755

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SECRETARY OF STATE
TREASURY
MASSACHUSETTS

T. Burch MAR 14 2012

COVER LETTER

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

SUBJECT: Amanda M Faigen, RN, DDS

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Amanda M. Faigen, RN, DDS

Name (Printed or typed)

2560 RCA Blvd #101

Address

Palm Beach Gardens, FL 33410

City, State & Zip

561-622-5600

Daytime Telephone number

dkupay@comcast.net

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 29, 2012

AMANDA M. FAIGEN, RN, DDS
2560 RCA BLVD 101
PALM BEACH GARDENS, FL 33410

SUBJECT: AMANDA M. FAIGEN, RN, DDS, INC.
Ref. Number: W12000011755

We have received your document for AMANDA M. FAIGEN, RN, DDS, 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):

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.

You must list at least one incorporator with a complete business street address.

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) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 912A00008210

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: Amanda M. Faigen, RN, DDS, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2560 RCA Blvd #101
Palm Beach Gardens, FL
33410

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Dentist

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amanda M. Faigen
Address: 1013 Country Club Dr.
North Palm Beach, FL
33408

Name and Title: Dentist/owner
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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


Name: Travani and Richter, P.A.
Address: 1935 Commerce Lane Ste #9
Jupiter, FL 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Amanda Faigen
Address: 1013 Country Club Dr.
North Palm Beach, FL 33408

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



Required Signature/Registered Agent

2/22/12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

2/20/2012

Date