

# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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# FLORIDA PROFIT/NON PROFIT CORPORATION

Adam Jones DMD, P.A. Ccrtificate of Status 0 Certified Copy 1 04 Page Count Estimated Charge \$78.75

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January 30, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORP

SUBJECT: ADAM JONES DMD, P.A.

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#### ARTICLES OF INCORPORATION

OF

# Adam Jones DMD, P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I. NAME

The name of the corporation shall be:

#### Adam Jones DMD, P.A.

The principal place of business of this corporation shall be:

2230 SW Williston Rd., Apt. 2731
Gainesville, FL 32608

#### ARTICLE II. NATURE OF BUSINESS

This is a Prosthodontist

Prepared by Ronald A. Brown & Associates, P.A. P. O. Box 999, Winter Haven, FL 33882-0999

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#### ARTICLE III. CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at one time is 1000 shares of common stock having \$1.00 par value per share.

#### ARTICLE IV. TERM OF EXISTENCE

This corporation is to exist perpetually.

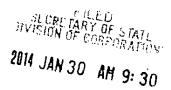
#### ARTICLE V. OFFICERS AND DIRECTORS

The names and street addresses of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until their successors are elected are:

Adam Jones 2230 SW Williston Rd., Apt. 2731 Pres., Sec., Treas. Gainesville, FL 32608

## ARTICLE VI. INCORPORATOR (S)

The name and street address of the incorporator to this Articles of Incorporation is Adam Jones, 2230 SW Williston Rd., Apt. 2731, Gainesville, FL 32608.



## CERTIFICATE OF DESIGNATION

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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 Adam Jones DMD, P.A.
The name and address of the registered agent and office
Is Adam Jones, 2230 SW Williston Rd Apt., 2731
Gainesville, FL 32608.

SIGNATURE
TITLE Pres., Sec., Treas.
DATE

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

DATE DATE

IN WITNESS WHEREOF, the undersigned incorporate has executed these Articles of Incorporation this 16th day of January, 2014.

Signature of Incorporator

Adam Jones