

P140000016826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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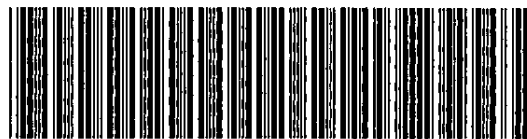
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB 21 AM 11:24

*[Handwritten signature]*  
2-21-14



**THE FLORIDA HEALTHCARE LAW FIRM**  
The Law Offices of Jeff Cohen, P.A.

The Gulfstream Bank Building  
909 S.E. 5<sup>th</sup> Avenue, Suite 200  
Delray Beach, Florida 33483

Daytona Beach • Fort Lauderdale • Fort Myers • Melbourne • Naples • Pensacola • Tampa

February 17, 2014

VIA UNITED STATES MAIL  
Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Domestication of **Tull Oral and Facial Surgery, P.A.**

Dear Sir or Madam:

Enclosed please find a cover letter, Certificate of Domestication, and Articles of Incorporation for Tull Oral and Facial Surgery, P.A. and a check in the amount of \$128.75.

Tull Oral and Facial Surgery, P.A. was originally incorporated in the State of Kansas and later domesticated in Missouri, where it remains in good standing.

Do not hesitate to contact us in the event that you have any questions.

Very Truly Yours,

Jacqueline Bain

*(admitted exclusively in New York)*

Enclosures

## COVER LETTER

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

SUBJECT: Tull Oral and Facial Surgery, P.A.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

### FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

### OPTIONAL:

Certificate of Status \$ 8.75

Autumn Piccolo

Name (printed or typed)

909 SE 5th Street, Suite 200

Address

Delray Beach, FL 33483

City, State & Zip

Daytime Telephone Number

apiccolo@floridahealthcarelawfirm.com

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

# CERTIFICATE OF DOMESTICATION

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB 21 AM 11:25

The undersigned, Gregory T. Tull, DMD, President  
(Name) (Title)  
of Tull Oral and Facial Surgery, P.A. a foreign corporation,  
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was June 26, 2007.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Kansas.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Tull Oral and Facial Surgery, P.A.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Tull Oral and Facial Surgery, P.A.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Missouri.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Tull Oral and Facial Surgery, P.A.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 17 day of February, 2014.

  
(Authorized Signature)

## Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

**ARTICLES OF INCORPORATION**  
IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 FEB 21 AM 11:25

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

Tull Oral and Facial Surgery, P.A.

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

151 NE 5th Avenue

Unit 303

Delray Beach, FL 33483

Mailing Address

151 NE 5th Avenue

Unit 303

Delray Beach, FL 33483

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

the practice of oral and maxillofacial surgery, and  
services ancillary thereto.

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 30,000

**ARTICLE V   INITIAL DIRECTORS AND/ OR OFFICERS**

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

President / Gregory Tallmadge Tull, DMD

151 NE 5th Avenue, Unit 303

Delray Beach, FL 33483

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

*THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:*

Jeffrey L. Cohen, Esq.  
909 SE 5th Ave., Ste. 200  
Delray Beach, FL 33483

**ARTICLE VII INCORPORATOR**

*THE NAME AND ADDRESS OF THE INCORPORATOR IS:*

Jeffrey L. Cohen, Esq.  
909 SE 5th Ave., Ste. 200  
Delray Beach, FL 33483

\*\*\*\*\*

***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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.***

Signature/Registered Agent

02/17/2014

Date

Signature/Incorporator

02/17/2014

Date