

PK4000037759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100257778131

03/18/14--01008--004 **105.00

FILED
14 APR 28 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

111K1-179114

MD 4/29

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Doral Dental Group, P.A.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Jeffrey Galvan, Esq

Contact Person

Galvan Messick, LLP

Firm/Company

1900 NW Corporate Blvd, 101 W

Address

Boca Raton, FL 33431

City, State and Zip Code

jgalvan@galvanmessick.com

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

For further information concerning this matter, please call:

Jeffrey Galvan, Esq

Name of Contact Person

at (561) 994-5956

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees

☐ \$113.75 Filing Fees
and Certificate of
Status

☐ \$113.75 Filing Fees
and Certified Copy

☐ \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2014

JEFFREY GALVAN, ESQ.
GALVAN MESSICK, LLP
1900 NW CORPORATE BLVD., #101 W
BOCA RATON, FL 33431

SUBJECT: DORAN DENTAL GROUP, P.A.
Ref. Number: W14000017944

We have received your document for DORAN DENTAL GROUP, P.A. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 514A00006064



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2014

JEFFREY GALVAN, ESQ.
GALVAN MESSICK, LLP
1900 NW CORPORATE BLVD., #101 W
BOCA RATON, FL 33431

SUBJECT: DORAL DENTAL GROUP, P.A.
Ref. Number: W14000017944

We have received your document for DORAL DENTAL GROUP, P.A. and your check(s) totaling \$105.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 514A00006064

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR 28 PM 4:09

FILED

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Doral Dental Group, LLC

L13000171532

Enter Name of Other Business Entity

2. The "Other Business Entity" is a limited liability company

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on December 11, 2013

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

Doral Dental Group, P.A.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 31 day of March, 2014.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have been selected, an Incorporator: Mariana Cardenas
Printed Name: Marianela Cardenas Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Mariana Cardenas
Printed Name: Marianela Cardenas DDS MS, PA Title: Manager by Mariana Cardenas DDS MS

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

FILED
14 APR 28 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
14 APR 28 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: DORAL DENTAL GROUP, P.A.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

Principal street address	Mailing address, if different is:
<u>3895 NW 107th Avenue, Unit 103</u>	<u>7887 N Kendall Dr, Suite 103</u>
<u>Doral, FL 33178</u>	<u>Miami, Florida 33156</u>

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
A dental practice.

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Marianela Cardenas, President</u>	Name and Title: _____
Address: <u>7887 N Kendall Dr, Suite 103</u>	Address: _____
<u>Miami, Florida 33156</u>	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

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

Name: Galvan Messick, LLP
Address: 1900 NW Corporate Blvd, Suite 101W
Boca Raton, FL 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marianela Cardenas
Address: 7887 N Kendall Dr, Suite 103
Miami, Florida 33156

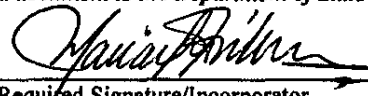
FILED
14 APR 28 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

3/31/14
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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

03/31/14
Date