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

ORIGINAL

SUBJECT: Joseph E Dotson DDS PA

(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: Joseph E Dotson DDS

Name (Printed or typed)

5301 S. Dale Mabry Hwy

Address

Tampa, FL 33611

City, State & Zip

(813) 839-8140

Daytime Telephone number

jdotsondds@gmail.com

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

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

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: Joseph E. Dotson DDS PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5301 S. Dale Mabry Hwy
Tampa, FL 33611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

A professional association S-Corporation for the practice of dentistry. Effective starting date January 2, 2015.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph E Dotson, President

Name and Title: _____

Address: 5301 S. Dale Mabry Hwy
Tampa, FL 33611

Address: _____

Name and Title: Katherine A Dotson, Vice President

Name and Title: _____

Address: 5301 S. Dale Mabry Hwy
Tampa, FL 33611

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

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:

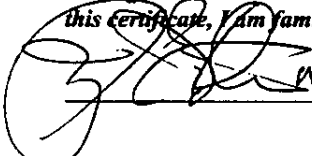
Name: Joseph E. Dotson DDS
Address: 5301 S. Dale Mabry Hwy
Tampa, FL 33611

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:


Name: Joseph E. Dotson DDS
Address: 5301 S. Dale Mabry Hwy
Tampa, FL 33611

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

 Joseph E Dotson DDS
Required Signature/Registered Agent

12-8-14
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.

 Joseph E Dotson DDS
Required Signature/Incorporator

12-8-14
Date