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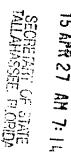
| (Re | equestor's Name) | | | |
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| (Address) | | | | |
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| (Ci | ity/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

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

| SUBJECT: Pont | e Vedra Pediatric D | - | |
|----------------------|---|-------------------------------------|--|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | d 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 CO | PY REQUIRED |
| | udwig & Associat Name 150 Belfort Rd. S | e (Printed or typed) | |
| <u> </u> | | Address | |
| Ja | acksonville, Florid | da 32256 State & Zip | |
| 90 | 04-281-0145 | elephone number | |
| jlu | dwig@ludwiglaw.ne | • | notification) |

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



ARTICLES OF INCORPORATION OF

15 APR 27 AM 7: 14

PONTE VEDRA PEDIATRIC DENTISTRY AND ORTHODONTICS, P.A.

ARTICLE I

The name of this corporation is: Ponte Vedra Pediatric Dentistry and Orthodontics, P.A. The principal office of the corporation is located at 480 Town Plaza Avenue, Unit 110, Ponte Vedra, Florida 32081.

ARTICLE II

The existence of this corporation shall commence upon the filing of these Articles. This corporation shall thereafter have perpetual existence.

ARTICLE III

The purpose for which this corporation is organized is the practice of dentistry and to carry on any other lawful activity permitted by Chapter 621 of the Florida Statutes and not specifically precluded by any provision of Section 621.08 thereof.

ARTICLE IV

The aggregate number of shares of stock which the corporation shall have authority to issue is One Thousand (1,000) shares, consisting of one class only, designated as "common stock," one dollar (\$1.00) par value. Each issued and outstanding share shall be entitled to one vote. The shareholders, by either shareholders' agreement recorded in the minute book or bylaw provision, may impose such restrictions on the sale, transfer or encumbrance of the stock of this corporation as they may see fit.

ARTICLE V

No holder of the common stock shall be entitled as a mater of right to subscribe for, purchase or receive any part of any issue of additional stock or shall have any preemptive right to subscribe or purchase the same.

ARTICLE VI

The initial number of directors for the corporation shall be one (1), and the shareholders, from time to time, in accordance with the bylaws and Article XII hereof, may change the number of directors, but in no case shall be less than one (1) director.

ARTICLE VII

The names and post office addresses of the first Board of Directors, who each shall hold office for the first year of existence of the corporation or until his or her successor is elected or appointed and qualified are:

Lindsay G. Maples, D.M.D 480 Town Plaza Avenue, Unit 110 Ponte Vedra, Florida 32081

ARTICLE VIII

The name and post office address of the incorporator of these Articles of Incorporation is:

Lindsay G. Maples, D.M.D 480 Town Plaza Avenue, Unit 110 Ponte Vedra, Florida 32081

ARTICLE IX

The name and address of the initial registered agent of this corporation is:

Ludwig & Associates, P. A., 5150 Belfort Road South, Building 500, Jacksonville, Florida 32256

ARTICLE X

All of the shareholders, directors and officers of the corporation are required at all times to be persons licensed to practice dentistry in the State of Florida. If any shareholder, director, agent or employee of the corporation who has been rendering professional dentistry services to the public becomes legally disqualified to render professional dentistry services in the State of Florida, or such person accepts employment that, pursuant to existing law, places restrictions or limitations upon that person's continued rendering of professional dentistry services, then such person shall sever all employment with, and financial interests in, the corporation, subject to the terms of any bylaws or written agreements by and between such person and the corporation and/or the other shareholders which are not inconsistent with the requirements of the laws of the State of Florida. If at any time all of the shareholders of the corporation shall cease, at any one time and for any reason, to be licensed to practice dentistry in the State of Florida, the corporation shall thereupon be deemed to be converted into and shall henceforth be operated solely as a business corporation.

ARTICLE XI

The Board of Directors is specifically authorized to make provisions for indemnification of directors, officers, employees and agents to the full extent permitted by law.

ARTICLE XII

This corporation reserves the right to amend, alter, change or repeal any provisions contained in its Articles of Incorporation, in the manner prescribed by law, and all rights conferred upon shareholders herein are granted subject to this reservation.

THE UNDERSIGNED, being the incorporator hereinbefore named for the purpose of forming a corporation to do business both within and without the State of Florida, to make, subscribe, acknowledge and file these Articles, hereby declares and certifies that the facts herein stated are true and accordingly have hereunto set out her hand and seal this 21 day of March 2015

| 2015 | | HPR) |
|---|---|---------------------------|
| Signed, sealed and delivered in the present of: | | Lindsay G. Maples, D.M.D. |
| Molley Sister | | |
| STATE OF FLORIDA |) | |
| COUNTY OF DUVAL |) | |

The foregoing instrument was sworn to and acknowledged before me this 2 / day of March 2015, by Lindsay G. Maples, D.M.D. who is personally known to me.

Wy Comm. Expired
Oxfor F. 187961
No. FF 187961
AND FF 1879

Signature of Notary

Name of Notary: 6th 6un

Commission Number: FF 16736/ My Commission expires: 6900T/8



15 APR 27 AM 7: 14

CERTIFICATE NAMING AGENT UPON WHOMECRETARY OF STATE PROCESS MAY BE SERVED TALLAHASSEE, SLORIDA

Pursuant to Section 48.091, Florida Statutes, the following is submitted:

That Ponte Vedra Pediatric Dentistry and Orthodontics, P. A. is a professional corporation duly organized and existing under the laws of the State of Florida, has named Ludwig & Assoc, P.A., located at 5150 Belfort Road S., #500, Jacksonville, Florida 32256, as its agent to accept service of process within this state.

PONTE VEDRA PEDIATRIC DENTISTRY AND ORTHODONTICS, P.A.

04/21/15

ACCEPTANCE

Having been named to accept service of process for Ponte Vedra Pediatric Dentistry and Orthodontics, P.A., 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.

04/23/2015 Date/

ffrex R Ludwig, as President