

# **Electronic Articles of Incorporation For**

**P15000064870  
FILED  
July 31, 2015  
Sec. Of State  
nhaney**

FAMILY MEDICAID DENTAL, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

FAMILY MEDICAID DENTAL, INC.

## **Article II**

The principal place of business address:

5317 W. ATLANTIC AVE.  
SUITE 101  
DELRAY BEACH, FL. U. 33484

The mailing address of the corporation is:

5317 W. ATLANTIC AVE.  
SUITE 101  
DELRAY BEACH, FL. U. 33484

## **Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

The number of shares the corporation is authorized to issue is:

1

## **Article V**

The name and Florida street address of the registered agent is:

JAMIE WYMANN  
5317 W. ATLANTIC AVE.  
SUITE 101  
DELRAY BEACH, FL. 33484

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: JAMIE WYMANN

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## **Article VI**

The name and address of the incorporator is:

JAMIE WYMANN  
5317 W. ATLANTIC AVE.  
SUITE 101  
DELRAY BEACH, FL 33484

Electronic Signature of Incorporator: JAMIE WYMANN

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
JAMIE WYMANN  
5317 W. ATLANTIC AVE. SUITE101  
DELRAY BEACH, FL. 33484 U.

## **Article VIII**

The effective date for this corporation shall be:

07/26/2015