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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
OCT 11 PM 2:15

10/12/16



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

October 5th, 2016

To Whom it may concern,

My name is Douglas H. Baker, owner of Tiara Dental Laboratory in Naples Florida, document number P15000095389. I just found out that my corporation was dissolved by the State of Florida and I have no intentions of reinstating.

I wish to release the name, "Tiara Dental Laboratory Inc." so I can form a new corporation using the same name.

I appreciate your help in this matter. If you have any questions please call at 1-239-451-3410.

Thank you,

A handwritten signature in black ink that reads "Douglas H. Baker". The signature is written in a cursive, flowing style.

Douglas H. Baker
Tiara Dental Laboratory Inc.

COVER LETTER

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

SUBJECT: Tiara Dental Laboratory Inc.

(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: Douglas H. Baker

Name (Printed or typed)

967 Tivoli Dr.

Address

Naples Florida, 34104

City, State & Zip

231-642-7441

Daytime Telephone number

dhbaker916@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: Tiara Dental Laboratory Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

967 Tivoli Dr.

Naples, Fl 34104

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To start a Dental Laboratory in Naples Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cynitha Baker President

Name and Title: Douglas H. Baker COO

Address 967 Tivoli Dr

Address: 967 Tivoli Dr.

Naples, Fl 34104

Naples, FL 34104

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Douglas H. Baker
Address: 967 Tivoli Dr
Naples, FL 34104

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE
2016 OCT 11 PM 2:15

ARTICLE VII INCORPORATOR

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

Name: Tiara Dental Laboratory
Address: 3940 Radio Rd
Naples, FL 34104

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Douglas H. Baker 10/2/2016
Required Signature/Registered Agent 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.

Douglas H. Baker 10/2/2016
Required Signature/Incorporator Date