

**P17000064899**

**Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
KATHERINE DE ARMAS, P.A.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

**RECEIVED**

17 AUG -2 PM 3:34

CORPORATIONS  
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D O'KEEFE

AUG 03 2017



August 2, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORP USA

SUBJECT: KATHERINE DE ARMAS, P.A.  
REF: W17000063071

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE  
Regulatory Specialist II

FAX Aud. #: H17000201274  
Letter Number: 817A00015595

P.O BOX 6327 - Tallahassee, Florida 32314

H17 000 201274

**ARTICLES OF INCORPORATION  
PROFESSIONAL CORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**DATE: JULY 28, 2017**

**ARTICLE I - NAME**

The name of the Professional Association is:

**KATHERINE DE ARMAS, P.A.**

**ARTICLE II - PRINCIPAL OFFICE ADDRESS:**

The mailing address and street address of the principal office of the Professional Association is:

**10525 SW 153RD. CT. UNIT 1  
MIAMI, FL 33196**

**ARTICLE III - PURPOSE:**

The purpose for which the Professional Association is organized is: For the purpose of engaging in the Professional Services of Dentistry.

**ARTICLE IV - SHARES:**

The number of shares initially authorized of stock is: 7,500

(continued)

17 JUL 2017 11:11:11

**ARTICLE V - INITIAL OFFICER AND/OR DIRECTOR:**

The name and Florida Street address of the Initial Officer is:

Name and Title:

Address:

Katherine De Armas

10525 SW 153RD. CT. UNIT 1  
MIAMI, FL 33196

**ARTICLE VI - REGISTERED AGENT:**

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

Name:

Address:

Katherine De Armas

10525 SW 153RD. CT. UNIT 1  
MIAMI, FL 33196

**ARTICLE VII - INCORPORATOR**

The name and address of the is:

Name:

Address:

Katherine De Armas

10525 SW 153RD. CT. UNIT 1  
MIAMI, FL 33196

Katherine D  
Incorporator Signature

07/21/2017  
Date

Having been named as registered agent to accept service of process for the above stated Professional Association 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.

Katherine D  
Registered Agent Signature

07/21/2017  
Date

(Continued)

**ARTICLE VIII - EFFECTIVE DATE**

The effective date of the Professional Association shall be: August 1st, 2017.

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.

Katharine D  
Member/Manager Signature

07/31/2017  
Date

17 JUL 2017 11:00

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