

# P180000 22015

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

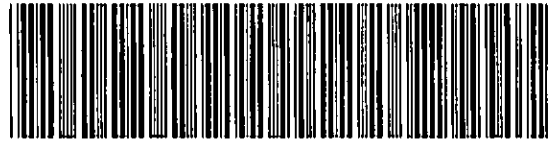
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18 MAR - 8 PM 2:06  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 16, 2018

ERIC B. ROTHSTEIN, DDS  
364 NW 101ST AVE.  
CORAL SPRINGS, FL 33071

SUBJECT: E. BENNETT ROTHSTEIN, DDS, INC  
Ref. Number: W18000015753

FILED  
18 MAR -8 PM 2:06  
TALLAHASSEE, FLORIDA

We have received your document for E. BENNETT ROTHSTEIN, DDS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent and incorporator must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 818A00003362

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INFORMATION SERVICES



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2018 FEB 14 PM 1:10

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
TALLAHASSEE, FLORIDA

January 24, 2018

ERIC B. ROTHSTEIN  
364 NW 202ST AVE  
CORAL SPRINGS, FL 33071

SUBJECT: E. BENNETT ROTHSTEIN, DDS, INC.  
Ref. Number: W18000007309

We have received your document for E. BENNETT ROTHSTEIN, DDS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 918A00001569

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18 MAR -8 PM 2:06  
TALLAHASSEE, FLORIDA

January 1, 2018

Eric B. Rothstein, DDS  
364 NW 101st Ave.  
Coral Springs, FL 33071

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

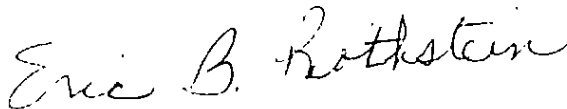
RE: **Entity Name:** E. BENNETT ROTHSTEIN, DDS, INC  
**Document Number:** P16000054586

Dear Sir or Madam:

Please be advised that I have no intention of reinstating the above referenced corporation or paying the late filing fee of \$700.00. Please release the entity name, E. BENNETT ROTHSTEIN, DDS, INC.

Thank you in advance for your assistance on this matter.

Sincerely,



Eric B. Rothstein, DDS.  
E. BENNETT ROTHSTEIN, DDS, INC.  
Vice President

1610  
18 MAR -8 PM 2:06  
TALLAHASSEE, FLORIDA

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: E. BENNETT ROTHSTEIN, DDS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1500 N. UNIVERSITY DRIVE

SUITE 111

CORAL SPRINGS, FL 33071

Mailing address, if different is:

364 NW 101st AVE.

CORAL SPRINGS, FL 33071

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: BEVERLY S. ROTHSTEIN PRES

Address: 364 NW 101st AVE.

CORAL SPRINGS, FL 33071

Name and Title: ERIC B. ROTHSTEIN VP

Address: 364 NW 101st AVE.

CORAL SPRINGS, FL 33071

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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: Paula Posyton  
Address: 7330 NW 18th Street #204  
Margate, FL 33063

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: Paula Posyton  
Address: 7330 NW 18th Street #204  
Margate, FL 33063

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/01/2018 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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*

Paula Posyton  
Required Signature/Registered Agent

1-16-18  
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.*

Paula Posyton  
Required Signature/Incorporator

1-16-18  
Date