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Florida Department of State

Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
VARONA ORAL AND MAXILLOFACIAL SURGERY INC

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

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JUL 19 2018

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:VARONA ORAL AND MAXILLOFACIAL SURGERY INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

324 SW 62ND CTMiami, FL 33144**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Yosvany VARONA DEL PINO (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yosvany VARONA DEL PINO324 SW 62ND CTMiami, FL 33144**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Yosvany VARONA DEL PINO324 SW 62ND CTMiami FL 33144SECRETARY OF STATE
TALLAHASSEE, FLORIDA

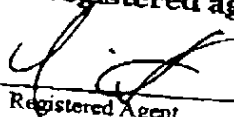
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Required Signatures:

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



Registered Agent7/17/18

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.



Incorporator7/17/18

Date

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