

DEC/02/2019/MON 04:21 PM

FAX No.

P. 001/003

12/2/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
LATIN DENTAL OF MIAMI, INC**

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

DEC 03 2019

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

**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:

LATIN DENTAL OF MIAMI, INC

**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

434 SW 12TH AVENUE SUITE 204

MIAMI, FL 33130

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO TRANSACT ANY AND ALL LAWFULL BUSINESS

**ARTICLE IV SHARES**

200 SHARES PAR VALUE @ \$1.00

The number of shares of stock is:

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

Name and Title: Cesar Francisco Hurtado JR. DDS. PD.

Name and Title:

Address

434 SW 12TH AVENUE SUITE 204

Address:

MIAMI, FL 33130

MIAMI, FL 33130

Name and Title: Ana B. Sanchez. SEC

Name and Title:

Address

434 SW 12TH AVENUE SUITE 204

Address:

MIAMI, FL 33130

Name and Title: Marleny Sanchez. TREA

Name and Title:

Address

434 SW 12TH AVENUE SUITE 204

Address:

MIAMI, FL 33130

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ana B. Sanchez. SEC  
Address: 434 SW 12TH AVENUE SUITE 204  
MIAMI, FL 33130

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

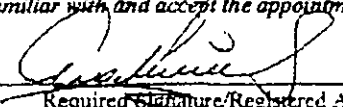
Name: Cesar Francisco Hurtado JR.  
Address: 434 SW 12TH AVENUE SUITE 204  
MIAMI, FL 33130

**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 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.

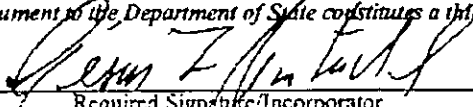
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

11/27/2019

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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

11/27/2019

Date