

Division of Corporations

P210000469473

Florida Department of State

Division of Corporations

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From:

Account Name : HUBCO
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**FLORIDA PROFIT/NON PROFIT CORPORATION
CHELSEA FARRELL DENTAL PA**

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CHELSEA FARRELL DENTAL PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13717 AMERICAN PRAIRIE PL
BRADENTON, FL 34211

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 SHARES AT NO PAR VALUE

ARTICLE IV PURPOSE

The purpose for which this corporation is/are formed, are as follows:

To practice the profession of : DENTISTRY

Prepared By:

Bruce B. Hubbard
238 WEST JERICHO TURNPIKE
HUNTINGTON STATION, NY 11746
(800)443-8177/(516)935-3940

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHELSEA FARRELL
969 E DEL WEBB BLVD
SUN CITY CENTER, FL 33573

ARTICLES VI INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

CHELSEA FARRELL - PRESIDENT / DIRECTOR
13717 AMERICAN PRAIRIE PL, BRADENTON, FL 34211

ARTICLES VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CHELSEA FARRELL
13717 AMERICAN PRAIRIE PL, BRADENTON, FL 34211

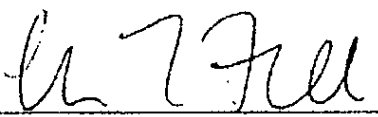
ARTICLES VII EFFECTIVE DATE

The date of Corporate Existence shall begin is:

Upon Filing

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2ND day of FEBRUARY 2021



CHELSEA FARRELL
SIGNATURE

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **CHELSEA FARRELL DENTAL PA**

2. The name and address of the registered agent and office is:

CHELSEA FARRELL

Name

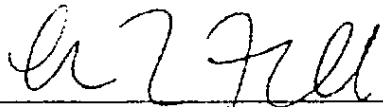
969 E DEL WEBB BLVD

(P.O. Box or Mail Drop Box NOT Acceptable)

SUN CITY CENTER, FL 33573

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



CHELSEA FARRELL
SIGNATURE

FEBRUARY 2, 2021

(Date)

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