## 0000 47573<sub>FILED</sub>

TRANSMITTAL LETTER

95 JUN 14 PH 1: 16

TALLAHASSEL FLORIDA

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

SUBJECT: TERPYLKIEIN DDS P.A. (Proposed corporate name - must include suffix)				40001513064 	
Enclosed is an original for:    470.00   Filing Fee	ginal and one (1) o \$78.75  Filing Fee & Certificate	### \$122.50 Filing Fee & Certified Copy  Additional Copy	0131.25 Filing Fee, Certified Copy & Certificate	]	
FRO		L.KLEIN. DD	<u>s</u>	-	
_ (\)	2784	NE 24 <sup>th</sup>	<u> </u>		
2 9/		HOUSE PT.	FL 3306	Ч	
$\mathcal{M}_{\mathcal{N}}$		785-8787 e Telephone number			

NOTE: Please provide the original and one copy of the articles.

FILED

## **ARTICLES OF INCORPORATION**

95 JUN 14 PH 1:16

SEURE IN STATE TALLAHASSEE, FLURIDA 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:

JERRYKKLEIN, DDS, P.A.

ARTICLE II PRINCIPAL OFFICE

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

2784 NE 24th St.

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

JERRYLIKLEW, DDS

2784 NE. 24th CA.

LIGHTHOUSE PT. FL 33064

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

JERRYLKIEW, DOS 2784 N.E. 24th St. LIGHTHOUSE PT. FL 33064

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

Jo day of Jone 1995.

Dem KlonSignature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF FILED REGISTERED AGENT/REGISTERED OFFICE 95 JUN 14 PM 1: 16

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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	JERRYLKLEIN DOS. P.A.	
2. The name and address of the regist	tered agent and office is:	_
JECK	VLK LEIN DDS (NAME)	
2784 (P.O. Box	N C. ) 4th 5t. N OF Mail Drop BOX NOT ACCEPTABLE)	
	(CITY/STATE/ZD)	
corporation at the place designated is agent and agree to act in this capacit	agent and to accept service of process for the above staten this certificate, I hereby accept the appointment as register by. I further agree to comply with the provisions of all statuserformance of my duties, and I am familiar with and accept to ed agent.	ed les
Leyelle: (SIGNATURE	6-10-95 (Date)	-