

1201 HAYS STREET  
TALLAHASSEE, FL 32301  
904-222-9171  
904-222-0193 FAX

800-342-8086



**P95000056981**

ACCOUNT NO. : 072100000032

REFERENCE : 644995 10283A

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : July 20, 1995

ORDER TIME : 8:54 AM

ORDER NO. : 644995

CUSTOMER NO: 10283A

CUSTOMER: Robert Jay Fish, D.d.s.  
ROBERT FISH & COMPANY

Suite 100  
7737 N. University Drive  
Tallahassee, FL 32313

300001542023  
-07/20/95 -01021 -001  
\*\*\*\*131.25 \*\*\*\*131.25

DOMESTIC FILING

NAME: GENERAL DENTAL PLAN, INC.

☒ ARTICLES OF INCORPORATION  
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY  
☐ PLAIN STAMPED COPY  
☒ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
95 JUL 20 PM 1:26

W15-14618

615, 515, 471

7/21/95 CORPORATE DETAIL RECORD SCREEN  
NUMBER: W95000014618 REJECTED FILING REF: 07/20/1995  
NAME : GENERAL DENTAL PLAN, INC.  
SUBMIT BY: CSC NETWORKS  
ADDRESS : 1201 HAYS STREET  
TALLAHASSEE, FL 32301  
USER ID : BROWN\_T DOCUMENT TYPE : D/P

3:15 PM

*Approved to file*

*637.419  
abolished*



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

July 20, 1995

CSC NETWORKS  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

SUBJECT: GENERAL DENTAL PLAN, INC.  
Ref. Number: W95000014618

95 JUL 24 11 12 38  
RECEIVED

*Please give the 20th's  
file date*

We have received your document for GENERAL DENTAL PLAN, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Pursuant to sections 637.419 and 637.425, Florida Statutes, "dental service plans" must obtain written approval from the Florida Department of Insurance before this document may be filed. Written approval may be obtained from:

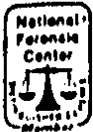
Florida Department of Insurance  
Bureau of Allied Lines  
200 E. Gaines St., Room 637  
Tallahassee, FL 32399  
(904) 488-6766.

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 (904) 487-6932.

Teresa Brown  
Corporate Specialist

Letter Number: 995A00034712



*Robert Jay Fish, D.D.S., J.D., F.A.G.D.*

COSMETIC RESTORATIVE AND GENERAL DENTISTRY  
CONSULTANT IN FORENSIC ODONTOLOGY

CENTRE AT WOODMONT - SUITE 100  
7737 NORTH UNIVERSITY DRIVE  
FORT LAUDERDALE, FLORIDA 33331-2968



TELEPHONE (305) 720-7700  
FACSIMILE (305) 724-4448

July 17, 1995

Attn: Karen Rozar  
Corporate Information Services  
P. O. Box 5828  
Tallahassee, Florida 32314

re: General Dental Plan, Inc.

Dear Ms. Rozar:

Pursuant to our telephone conversation earlier today, enclosed please find an original and one photocopy of the Articles of Incorporation of the General Dental Plan, Inc. Please register this corporation with the Secretary of State.

When the name was reserved, the Secretary of State's office advised CIS that the name must be approved by the Insurance Commissioner's office. Upon notification to me, I called the Insurance Commissioner's office and spoke with Joan Hendrix, Applications Coordinator, at (904) 922-3153, extension 2570, who verbally confirmed that this corporation's name was approved. Further, she was quite surprised that the Secretary of State's office would apply a condition for approval when none was required by her office. Should any confusion arise over this matter, she has asked me to convey that yourself or anyone from the Secretary of State's office should telephone her about this; that it is not usual and customary procedure to obtain a letter of approval for a corporate name from the Insurance Commissioner's office.

Please provide me with a certified copy and a certificate of good standing. As requested, I have enclosed payment to the Secretary of State's office in the amount of \$131.25.

Should you have any questions, please do not hesitate to contact me at your convenience. Thank you.

Sincerely yours,

ROBERT JAY FISH, D.D.S., J.D., F.A.G.D.

Robert J. Fish, D.D.S.

RJF:dgi  
Enclosure(s).

ARTICLES OF INCORPORATION  
OF  
**GENERAL DENTAL PLAN, INC.**

FILED

The undersigned subscriber to these Articles of Incorporation, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be : **GENERAL DENTAL PLAN, INC.**  
The principal place of business of this corporation shall be: **7737 N. UNIVERSITY DRIVE-SUITE 100  
FORT LAUDERDALE, FL 33321-2968**

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 7,500 shares of common stock having a par value of \$1 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be: **7737 NORTH UNIVERSITY DRIVE-SUITE 100  
FORT LAUDERDALE, FL 33321-2968**  
and the name of the initial registered agent of the corporation at that address is: **ROBERT J. FISH**

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholder upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof at the price at which it is offered to others.

ARTICLE VII. SPECIAL PROVISION

It is the intent of the incorporator that the corporation will qualify under Section 1244 of the Internal Revenue Code and that the corporation will file a Subchapter S Corporation.

ARTICLE VIII. DIRECTORS

This corporation shall have no Directors, initially. The affairs of the Corporation will be managed by the shareholders until such time Directors are designated as provided by the Bylaws.

ARTICLE IX. SUBSCRIBER

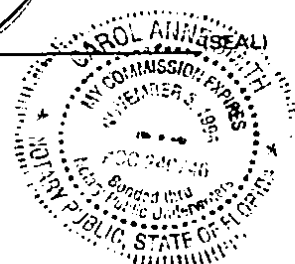
The name and street address of the subscriber of these Articles of Incorporation is:  
**ROBERT J. FISH; 7737 NORTH UNIVERSITY DRIVE-SUITE 100; FORT LAUDERDALE, FL 33321-2968**

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal on this 12th day of July, 1995.

Notarized the 12th day of July, 1995.

My commission expires 11-5-96

Carol Anne Smith (Signed)  
Notary



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

PURSUANT TO THE PROVISIONS OF SECTION 807.0501 OR 817.0501, 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: General Dental Plan, Inc.

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

Robert J Fish

(Name)

7737 N. University Dr - #100

(P.O. Box not acceptable)

Fort Lauderdale, FL 33321

(City/State/Zip)

FILED  
JUL 20 PM 1:26

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Robert J Fish

(Signature)

P95000056981

CDP

GENERAL DENTAL PLAN, Inc. • 7737 North University Drive-Suite 100 • Fort Lauderdale, Florida 33321-2968 • (954) 944-6548

October 8, 1997

Attn: Amendments Section  
Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314-6327

700002320117--4  
-10/14/97--01057--020  
\*\*\*\*\*35.00  
968.75

re: GENERAL DENTAL PLAN, INC.

Dear Sir or Madam:

Enclosed please find our check #2003 payable to Florida Secretary of State in the amount of \$958.75 to cover the following charges:

1. Reinstatement (1996)	\$915.00
2. Certificate of Status	8.75
3. Name change amendment	35.00
	\$958.75

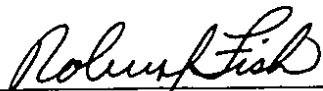
Also enclosed please find our Application for Reinstatement and Amendment to change the corporate name from General Dental Plan, Inc. to General Dental Plans of Florida, Inc.

Should you have any questions or desire additional information, please do not hesitate to contact the undersigned at your earliest convenience.

Thank you for your kind, prompt attention to these matters.

Sincerely yours,

GENERAL DENTAL PLAN, INC.



Robert J. Fish, D.D.S., J.D., F.A.G.D.  
President

RJF:dgj  
Enclosure(s) as stated herein.

FILED  
OCT 10 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 14 1997

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

FILED  
97 OCT 10 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

GENERAL DENTAL PLAN, INC.

(present name)

*Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

#1 *name change & corporation:*

*Change name to:*

GENERAL DENTAL PLANS OF FLORIDA, INC

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:



**THIRD:** The date of each amendment's adoption: 10/1/97

**FOURTH: Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_ voting group"

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 1<sup>st</sup> day of October, 19 97

Signature Robert J. Fish President  
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

ROBERT J. FISH

Typed or printed name

PRESIDENT

Title