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EMPIRE CORPORATE KIT
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CONTACT: RAY STORMONT

PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: AMANDA M. EDER, DDS, PA.

AUDIT NUMBER.....H96000018113

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 5

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ARTICLES OF INCORPORATION

OF

AMANDA M. EDER, DDS, PA.

The undersigned incorporator, for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Amanda M. Eder, DDS, PA.

ARTICLE II PRINCIPAL OFFICE

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

4408 S. Ocean Blvd. Ste. A
Highland Beach, Florida 33487

ARTICLE III PURPOSE

The purpose of this corporation shall be the practice of Dentistry.

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares of voting stock at \$1.00 par value per share.

Prepared By:

Bruce C. Scuttillo
Scuttillo & Blake, CPA, PA
8000 N University Dr.
Ft. Lauderdale, FL 33321
(954) 721-5222

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ARTICLE V EFFECTIVE DATE

The term for which this corporation shall exist shall be from January 1, 1997 to perpetuity.

ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Barry C. Scuttillo
8000 North University Drive
Fort Lauderdale, Florida 33321

ARTICLE VII BOARD OF DIRECTORS

The name and address of the initial board of directors shall be:

Amanda M. Eder, DDS 4408 S. Ocean Blvd. Ste. A
Highland Beach, Florida 33487

ARTICLE VIII OFFICERS

The name, title and address of the officer of this corporation shall be:

Amanda M. Eder, DDS Pres/Secretary 4408 S.Ocean Blvd. Ste. A
Highland Beach, Florida 33487

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ARTICLE IX INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation shall be:

Harry C. Scuttillo
8000 North University Drive
Fort Lauderdale, FL 33321

The undersigned has executed these Articles of Incorporation this
30th day of December, 1996.

Harry C. Scuttillo

Incorporator

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT AND 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 designation, the registered office and registered agent in the State of Florida.

1. The name of the corporation is Amanda M. Kder, DDS, PA.
2. The name and address of the registered agent is:

Barry C. Scuttillo
8000 North University Drive
Fort Lauderdale, FL 33321

X Barry C. Scuttillo

Having been named as registered agent, I hereby accept the appointment of registered agent 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 my obligations of my position of registered agent.

X Barry C. Scuttillo

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