

P97000003233

Alberto Mantovani

Requestor's Name

850 Ives Dairy Road

Address

North Miami Beach 33179

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Alberto Mantovani DDS, P.A.

(Corporation Name)

(Document #)

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***122.50 ***122.50

2. _____

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 JAN 13 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 12 1996. BSB

(639)

W96-26208



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 12, 1996

ALBERTO MANTOVANI
850 IVES DAIRY ROAD
NORTH MIAMI BEACH, FL 33179

SUBJECT: ALBERTO MANTOVANI DD.S., P.A.
Ref. Number: W96000026208

We have received your document for ALBERTO MANTOVANI DD.S., P.A. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The specific nature of business of the professional association must be stated in the document.

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) 487-6925.

Brenda Baker
Corporate Specialist

Letter Number: 596A00055706

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PRESTIGE TITLE
PRESTIGE TITLE

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97 JAN 13 PM 12:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

ALBERTO MANTOVANI D.D.S. P.A.

I, the undersigned hereby make, subscribe, acknowledge and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

Alberto Mantovani D.D.S. P.A.

ARTICLE II

The general nature of the business to be transacted by this Corporation shall be to engage in any or all lawful activity for which corporations may be incorporated under the provisions of the Florida General Corporations Act. The Purpose of this Corporation is to engage in the business of the practice of dentistry.

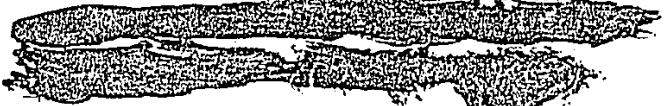
ARTICLE III

The total authorized capital stock of the corporation shall be 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV

This corporation shall exist perpetually.

ARTICLE V

The street address of the initial registered office of the corporation and principal place of business is: California Club Hall
 850 Ives Dairy Rd.
No. MIAMI Bch, FL 33179
and the name of its initial registered agent at such address is:

ALBERTO MANTOVANI

ARTICLE VI

The number of directors constituting the initial Board of directors of the Corporation is one and the name and address of the person who is to serve as the said director is:

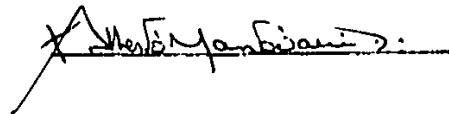
ALBERTO MANTOVANI
850 IVES DAIRY ROAD
NORTH MIAMI BEACH, FLORIDA 33179

ARTICLE VII

The name and address of the incorporator is:

ALBERTO MANTOVANI
850 IVES DAIRY ROAD
NORTH MIAMI BEACH, FLORIDA 33179

IN WITNESS WHEREOF, I have hereunto set my hand and seal
this 5th day of December 1996



STATE OF FLORIDA)
)ss.:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day before me, a notary public duly authorized in the State and County named above, personally appeared ALBERTO MANTOVANI to me known to be the person described in and who executed the foregoing Articles of Incorporation for the purposes therein set forth.

IN WITNESS WHEREOF, I have hereunto affixed my hand and official seal at Fort Lauderdale, Florida, Broward County, this 5th day of DECEMBER, 1996

My Commission Expires



HOWARD S. GAINES
MY COMMISSION # CC249386 EXPIRES
January 5, 1997
BONDED THROUGH TROY FARM INSURANCE, INC.

NOTARY PUBLIC

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JAN 13 PM 4:52
TALLAHASSEE, FLORIDA

The undersigned, ALBERTO MANTOVANI, having been designated to act as registered agent hereby agrees to act in that capacity.

Alberto Mantovani
REGISTERED AGENT

BEFORE ME, the undersigned authority, on this day personally appeared ALBERTO MANTOVANI, who, first being duly sworn, deposes and says that he is the person designated as Registered Agent in the above and foregoing Acceptance; that he has read the same knows the contents thereof, and that the same is true and correct.

SWORN TO AND SUBSCRIBED before me on this 12 day of

December 1996

My Commission Expires



HOWARD S. GAINES
MY COMMISSION # CC249386 EXPIRES
January 5, 1997
BONDED THROUGH TROY FARM INSURANCE, INC.

NOTARY PUBLIC