POTOSSOS BAR

40002037094--2 -12/24/96--01107--011 ******70.00 ******70.00

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

SUBJECT: PAYNE, BARFIELD AND HODGE P.A.

(Proposed corporate name)

DIBIA FAIRFIELD DENTAL CENTER

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$ 70.00_____.

FROM:

CLEMENT W. BARFIELD

Name (printed or typed)

4800 W TAIRFIELD DR

Address

PENISACONA FL 3 2506

City, State, & Zip

(904) 456-9201

Telephone Number

W-27219 KR 12.30

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

08/13/97



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JAN 13 PM 3: 15

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 30, 1996

CLEMENT W. BARFIELD 4800 W. FAIRFIELD DRIVE PENSACOLA, FL 32506

SUBJECT: PAYNE, BARFIELD AND HODGE P.A. D/B/A/ FAIRFIELD DENTAL

CENTER

Ref. Number: W96000027219

We have received your document for PAYNE, BARFIELD AND HODGE P.A. D/B/A/ FAIRFIELD DENTAL CENTER and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

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.

Kimberly Rolfe Document Specialist

Letter Number: 996A00057697

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JAN 13 PM 3: 15

ARTICLES OF INCORPORATION

OF

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:

PAYNE, BARFIELD and Hodge, P.A.

ARTICLE II PRINCIPAL OFFICE

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

4800 W FAIRFIELD DR PENSACOLA FL 32506

ARTICLE III SHARES

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

10,000 (TEN THOUSAND) PAR VALUE \$1.00 (ONE DOLLAR)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLEMENT W BARFIELD VR.

PENSACOLA FL 32506

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incoins (are):		ator(s) to these Articles of Incorporation ARTICLE VI PURPOSE	
CLEMENT W. BARFIELD 4140 MENENDEZ DR PENSACOLA FL 32503	PRACTICE	OF	DENTIST
PHILIP A. PAYNE			
1555 BAYOU BLUD	1		
PENSACOLA FX 32503		•	
JOHN D. HORGE			
6880 W FAIRFIELD DR	1		
PENSACOLA FL 32506	1		•
The undersigned incorporator(s) has(have) e	executed these Articles of	Incorpora	ation this
Sixteenth day of Decem	5 <i>E</i> R . 19 <u>96</u> .		
Clement W Barfuld Sign	A DDS-		
Jan Galle 1115			
	nature		

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: PAYNG, BARFIELD + HODGE	, P.A.
	
2. The name and address of the registered agent and office is:	DIVISION 97 J
Chement W BARFIELD D.D.S (Name) 4800 W FAIRFIELD DR.	TOTAL CONTRACTOR
(P.O. Box NOT acceptable)	OF STATE
PENSACOLA FL 32506	3: 15

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.

SIGNATURE Clement WBarfield & DATE 12-16-96

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314