

PA7000051/56

TRANSMITTAL LETTER

97 JUN -9 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

300002205703--5
-06/09/97--01075--007
****122.50 ****122.50

SUBJECT: BRIDGE DENTAL TEAM, P.A.
(Proposed corporate name - must include suffix)

* Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: DONNA M. BRIDGE, D.M.D.
Name (printed or typed)

6340 NW 173RD ST
Address

MIAMI, FL 33015
City, State & Zip

(305) 828-4579
Daytime Telephone number

PA 6/10/97

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

ARTICLES OF INCORPORATION

FILED

or

BRIDGE DENTAL TEAM, P.A.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation being duly licensed to practice dentistry under the laws of the State of Florida adopt these Articles to form a Corporation under the Professional Service Corporation Act, F.S. 621 and other laws of the State of Florida.

ARTICLE I - NAME

The name of the professional service corporation is:

BRIDGE DENTAL TEAM, P.A.

ARTICLE II - PURPOSE

The professional service corporation is formed to engage in every phase and aspect of the practice of dentistry. In addition the corporation may invest the funds of the professional service corporation in real estate, mortgages, stocks, bonds or any other type of investment and own real and personal property necessary for the rendering of professional services.

ARTICLE III - TERM OF EXISTENCE

The professional service corporation shall have perpetual existence commencing on the date these Articles of Incorporation are filed with the State of Florida.

ARTICLE IV - CAPITAL STOCK

The capital stock of the professional service corporation shall be One Thousand shares of common stock having par value of One Dollar (\$1) per share.

ARTICLE V
INITIAL REGISTERED OFFICE, PRINCIPAL OFFICE AND AGENT

The address of the initial registered office and the principal office of this professional service corporation is:

6340 N.W. 173rd St
Miami, FL 33015

The name and street address of the Initial Registered Agent of this corporation is:

Donna M. Bridge, D.M.D.
6340 N.W. 173rd St
Miami, FL 33015

ARTICLE VI – INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1).

The name and address of the initial director of the corporation is as follows:

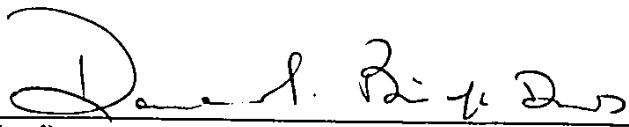
Donna M. Bridge, D.M.D.
6340 N.W. 173rd St
Miami, FL 33015

ARTICLE VII – INCORPORATORS

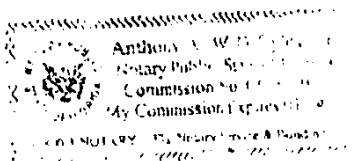
The name and address of the incorporator signing these Articles of Incorporation is as follows:

Donna M. Bridge, D.M.D.
6340 N.W. 173rd St
Miami, FL 33015

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 5th day of June, 1997.

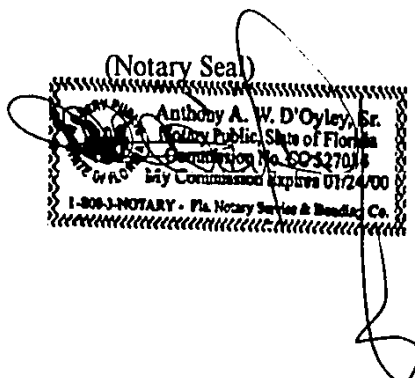

(seal)

STATE OF FLORIDA
County of



Before me, a notary public authorized to take acknowledgements in the State and County set forth above, personally appeared,
known to me and known to be the person who executed the foregoing Articles of Incorporation, and who acknowledged before me that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 5th day of JUNE 1997.



**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

FILED

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**Certificate of Registered Agent
of**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRIDGE DENTAL TEAM, P.A.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

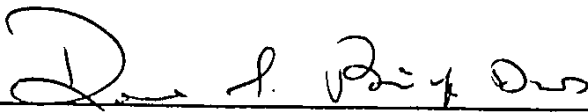
The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at

**6340 N.W. 173rd St
Miami, FL 33015**

Has named Donna M. Bridge, D.M.D. located at the aforesaid address, as its Registered Agent to accept service of process within the state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.


(registered agent)