

P9700052911

Requestor's Name  
Jeanne M. G. Andrews, Esq.  
Attorney for Client  
Address  
6255 N.W. 7th Ave  
Miami, FL 33150  
City/State/Zip Phone #

97 JUN 16 PM 12:14

CLERK OF THE CIRCUIT COURT  
TALLAHASSEE, FLORIDA

Office Use Only

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

1. Centrals Dental Prosthetics, Inc.  
(Corporation Name) (Document #)
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 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

600002212586--2  
-06/16/97--01035--006  
\*\*\*\*122.50 \*\*\*\*122.50

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

Blk 6/16/97

ARTICLES OF INCORPORATION  
OF  
CENTRALS DENTAL PROSTHETICS, INC.

**FILED**  
97 JUN 16 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation:

ARTICLE I: NAME OF THE CORPORATION

The name of the corporation is CENTRALS DENTAL PROSTHETICS, INC., hereinafter referred to as the "Corporation".

ARTICLE II: PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the principal office and mailing address of Corporation is 11805 NW 22nd Court, Miami, FL, 33167.

ARTICLE III: DURATION OF THE CORPORATION

The period of duration of the Corporation shall be perpetual unless dissolved according to law.

ARTICLE IV: PURPOSE OF THE CORPORATION

The purpose for which the Corporation is organized is to engage in any and all lawful business for which corporations may be incorporated under Chapter 607, Florida Statute, as amended.

#### ARTICLE V: AUTHORIZED SHARES

The Corporation is authorized to issue Five Thousand (5,000) shares of common stock with a par value of \$1.00 per share. All stock shall be of one class. The Board of Directors may authorize the issuance of such stock to such person(s) upon such terms and for such consideration as they may deem appropriate. The consideration may consist of any tangible or intangible property or benefit to the Corporation, including cash, promissory notes, services performed, promises to perform services evidenced by a written contract, or other securities of the Corporation.

#### ARTICLE VI: PREEMPTIVE RIGHTS

The Corporation elects to have preemptive rights. Every shareholder, upon the sale for cash of any new or reissued stock of the Corporation, shall have the right to purchase his pro-rata share thereof at the price at which it is offered to others.

#### ARTICLE VII: INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the Corporation's initial registered office is 11805 NW 22nd Court, Miami, FL 33167, and the registered agent at that office is LEOTHA M. LEWIS.

#### ARTICLE VIII: INITIAL BOARD OF DIRECTORS

The Corporation shall have two (2) directors constituting the initial Board of Directors. The number of directors may be increased or decreased from time to time by the bylaws.

The initial Board of Directors of the Corporation shall be comprised of:

LEOTHA M. LEWIS  
15600 NW 7<sup>th</sup> AVE #818  
Miami, FL 33169

WILLIE LEWIS  
15600 NW 7<sup>th</sup> AVE #818  
Miami, FL 33169

ARTICLE IX: INCORPORATOR

The incorporator of the Corporation is as follows:

LEOTHA M. LEWIS  
15600 NW 7<sup>th</sup> AVE #818  
Miami, FL 33169

IN WITNESS WHEREOF, I, LEOTHA M. LEWIS, the undersigned incorporator, have signed these Articles of Incorporation on this 12<sup>th</sup> day of June, 1997, and acknowledged the same to be my act.

  
\_\_\_\_\_  
LEOTHA M. LEWIS

STATE OF FLORIDA )

COUNTY OF DADE )

The foregoing instrument was acknowledged before me this 12<sup>th</sup> day of June, 1997 by LEOTHA M. LEWIS, who personally appeared before me at the time of notarization, and who is personally known to me or who produced a FLORIDA DRIVER'S LICENSE as identification.

NOTARY PUBLIC:

SIGN: Stanley B. Lewis

PRINT: Stanley B. Lewis  
STATE OF FLORIDA AT LARGE



STANLEY B LEWIS  
My Commission CC407787  
Expire Sep. 10, 1998  
Bonded by HAI  
800-422-1555

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED

FILED

97 JUN 16 PM 12:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Chapters 48.091 and 607.0501 of the Florida Statutes, the following is submitted, in compliance with said Acts:

First--That CENTRALS DENTAL PROSTHETICS, INC., desiring to organize under the laws of the State of Florida with its principal office 11805 NW 22nd COURT, as indicated in the Articles of Incorporation at City of MIAMI, County of DADE, State of Florida, has named LEOTHA M. LEWIS, at 11805 NW 22nd COURT, in the City of MIAMI, County of DADE, State of Florida, as its agent to accept service of process within this state.

-Acceptance of Agent-

ACKNOWLEDGMENT:

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.

BY: \_\_\_\_\_

LEOTHA M. LEWIS

DATE: \_\_\_\_\_

6/12/97