

P980000 25205

TRANSMITTAL LETTER

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

600002457956--1
-03/16/98-01060--005
*****70.00 *****70.00

SUBJECT: Diamond Crown Dental Consultants, Inc
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$ 70⁰⁰.

FROM:

Bruce Sanderson
Name (printed or typed)
1736 Cederstone Ct
Address
Lake Mary, FL 32746
City, State, & Zip
(407) 644-1478
Telephone Number

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

FILED
98 MAR 16 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK MAR 18 1998

ARTICLES OF INCORPORATION

OF

Diamond Crown Dental Consultants, Inc

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:

Diamond Crown Dental Consultants, Inc

ARTICLE II PRINCIPAL OFFICE

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

1736 Cederstone Ct
Lake Mary, FL 32746

ARTICLE III SHARES

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

ten thousand (10,000) @ \$1.00 per value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Bruce A. Sanderson
1736 Cederstone Ct
Lake Mary, FL 32746

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TALLAHASSEE, FLORIDA

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Bruce A Sanderson
1736 Cederstone Ct.
Lake Mary, FL 32746

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

_____ day of _____, 19 _____.



Signature

Signature

Signature

Articles of Incorporation

Filing Fee - \$35

**CERTIFICATE OF DESIGNATION
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: Diamond Crown Dental
Consultants, Inc

2. The name and address of the registered agent and office is:

Bruce A. Sanderson
(NAME)

1736 Cederstone Ct
(P.O. BOX NOT ACCEPTABLE)

Lake Mary, FL 32746
(CITY/STATE/ZIP)

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

BTS

DATE

98 MAR 16 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED