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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

071001002335 ACCT#:

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: PROGRESSIVE DENTAL ASSOCIATES, INC.

AUDIT NUMBER..... H98000013753

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS. 1

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DEPT A DEPARTMENT

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 28, 1998

FAS-T CORP. AGENTS, INC.

SUBJECT: PROGRESSIVE DENTAL ASSOCIATES, PA

REF: W98000017145

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 28, 1998

FAS-T CORP. AGENTS, INC.

SUBJECT: PROGRESSIVE DENTAL ASSOCIATES, PA

REF: W98000016936

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Becky McKnight Document Specialist FAX Aud. #: H98000013753 Letter Number: 798A00039639

98 JUL 29 PM 12: 12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

OF

PROGRESSIVE DENTAL ASSOCIATES', PA

ARTICLE I NAME

The name of the corporation shall be: PROGRESSIVE DENTAL ASSOCIATES, PA

ARTICLE II PRINCIPAL OFFICE

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

5050 SOUTH 25TH STREET

FORT PIERCE, FL 34982

ARTICLE III CAPITAL STOCK

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

ONE THOUSAND (1000)

PREPARED BY: TRIPLE CHECK INCOME TAX SERVICE 2506 Delaware Ave. Ft. Pierce, Fl. 34947 (561) 461-5987 ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES L. STRAWN

5050 SOUTH 25TH STREET

FORT PIERCE, FL 34982

ARTICLE V INCORPORATOR

The name and street address of the incorporator (o these Articles of Incorporation is:

JAMES L. STRAWN

5050 SOUTH 25TH STREET

ARTICLE VI PURPOSE

FORT PIERCE, FL

34982

The purpose of this corporation is to practice the field of dental medicine.

The undersigned has executed these Articles of Incorporation this 27'r' day of July 1995

Torres Strawer, Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 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:

PROGRESSIVE DENTAL ASSOCIATES, PA

2. office	The name and address of the registered agent and is:
-	5050 SOUTH 25TH STREET
-	FORT PIERCE, FL 34982
*Signatu	ire: PRESIDENT (tan
Title: Date: _	JULY 9, 1998
SERVICE PLACE I APPOINT CAPACIT OF ALL	AVING REEN NAMED AS RECISTERED AGENT AND TO ACCEPT E OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE IMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS IY. I FURTHER AGREE TO COMPLY WITH THE PROVIVIONS STATUTES RELATING TO THE PROPER AND COMPLETE MANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.
#Signatu	JULY 9, 1998