

P9 8000073684

TRANSMITTAL LETTER

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

SUBJECT: DENTAL DEPOT OF ORLANDO INC.
(Proposed corporate name - must include suffix)

700002622007--2
-08/21/98--01059--001
****131.25 ****131.25

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: DON BERMAN
Name (Printed or typed)

1424 Lakemont Dr.
Address

Cocoa, Fl. 32922
City, State & Zip

407-693-7275
Daytime Telephone number

FILED
98 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH /AUG 24 1998

ARTICLES OF INCORPORATION

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: Dental Depot Of Orlando Inc.

ARTICLE II PRINCIPAL OFFICE

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

3620 Silver Star Rd. mailing address P.O.Box 320691

Orlando Fl. 32808

Cocoa Beach Fl. 32932-0691

ARTICLE III SHARES

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

10,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Donald Berman
1424 Lakemont Dr.
Cocoa, Fl. 32922

FILED
98 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Donald Berman
1424 Lakemont Dr.
Cocoa, Fl. 32922

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

17 day of August, 19 98

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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 Dental Depot Of Orlando Inc.
2. The name and address of the registered agent and office is:

Donald Larry Berman
(NAME)

1424 Lakemont Dr.
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Cocoa, Fl. 32922
(CITY/STATE/ZIP)

FILED
98 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Donald Larry Berman
(SIGNATURE)

8/17/98
(DATE)