

P 99000050400
 Belinda T. France, Esq.
 Requestor's Name

703 E. Tennessee St.
 Address
 Tallahassee, FL 32308 (850) 224-1040
 City/State/Zip Phone #

Office Use Only

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

1. Lucas E. Stevens, D.M.D., M.S., P.A.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

- Walk in
 Pick up time 12:00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" 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

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

FILED
 99 JUN -4 AM 10:40
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

700002884737-5
 -06/04/99-01007-002
 *****78.75 *****78.75

RECEIVED
 99 JUN -4 AM 9:09
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

Handwritten signature/initials

Examiner's Initials

ARTICLES OF INCORPORATION
OF
LUCAS E. STEVENS, D.M.D., M.S., P.A.

FILED
99 JUN -14 11:10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract and legally authorized to practice the profession of Dentistry in the State of Florida, hereby proceeds to form a professional corporation in accordance with the Florida Professional Service Corporation Act, and hereby adopts the following Articles of Incorporation for such corporation:

ARTICLE I. NAME AND INITIAL ADDRESS

The name of this corporation and initial address is:

Lucas E. Stevens, D.M.D., M.S., P.A.
1309 Thomaswood Drive,
Tallahassee, Florida 32312

ARTICLE II. PURPOSE AND NATURE OF BUSINESS

The purpose of the Corporation and the nature of its business are as follows:

1. To engage in the practice of dentistry as a professional service corporation and to provide services incident thereto.
2. To own property enter into contracts and carry on any activity necessary or incidental to the accomplishment or furtherance of the purpose of this Corporation.
3. The services of this Corporation which consist of the practice of dentistry shall be carried out only through officers, employees and agents who are active members of the practice and in good standing and licensed in Florida to render the service of dentistry.
4. To do everything necessary, proper or convenient for the accomplishment of any of the purposes herein set forth, and to do every other act incidental thereto which is not forbidden by the laws of the State of Florida, by the Professional Rules of Conduct for the Dentistry profession or by the provisions of these Articles of Incorporation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that the Corporation is authorized to have outstanding at any one time is 100 shares having no par value. Such shares shall be of a single class of common stock. None of the shares of the Corporation may be issued to anyone other than an individual who is duly licensed to practice dentistry in the State of Florida and is an active member of the profession in good standing.

ARTICLE IV. DURATION

The Corporation shall have perpetual existence.

ARTICLE V. ADDRESS AND AGENT

The street address of the principal and initial registered office of the Corporation is 1309 Thomaswood Drive, Tallahassee, Florida 32312 and the name of its initial registered agent is Lucas E. Stevens. The Board of Directors may from time to time move the office to any other address in the State of Florida and change the registered agent.

ARTICLE VI. DIRECTORS

The Corporation shall be managed by a Board of Directors of at least one (1) Director. No person shall serve as a Director of the Corporation unless the person is duly licensed to practice dentistry and is an active member of the profession in good standing. The Directors shall be elected by the shareholders of the Corporation. The name and street address of each person who is to serve as a member of the initial Board of Directors is as follows:

<u>NAME</u>	<u>ADDRESS</u>
LUCAS E. STEVENS	1309 Thomaswood Drive Tallahassee, Florida 32312

ARTICLE VIII. RESTRAINT ON ALIENATION

No shareholder may sell or transfer his shares in the Corporation except to another individual who is eligible to be a shareholder of the Corporation under Florida law.

ARTICLE IX. DISQUALIFICATION

If any officer, shareholder, agent or employee of the Corporation who has been rendering professional service to the public for the Corporation becomes legally disqualified to render such professional services within Florida or accepts employment that places restrictions or limitations upon his or her continued rendering of such professional services, then the Corporation shall require him or her to comply with the Florida Professional Service Corporation Act by severing all employment with and financial interests in the Corporation.

ARTICLE X. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this the 3rd day of June, 1999.


LUCAS E. STEVENS

STATE OF FLORIDA
COUNTY OF LEON

BEFORE ME, personally appeared LUCAS E. STEVENS, to me well known and known to me to be the person described in and who executed the foregoing, and acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this the 3rd day of June, 1999, in the aforesaid County and State.


NOTARY PUBLIC

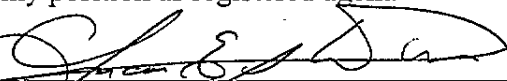
My Commission Expires:



Sherri P. Oster
MY COMMISSION # CC799928 EXPIRES
January 4, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

ACKNOWLEDGMENT OF REGISTERED AGENT

I, the undersigned person, having been named as registered agent and to accept service of process for the above-styled corporation at the place designated in this statement, 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: 
Registered Agent

FILED
99 JUN -4 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA