

8/13/99 **PROD 73/70**

**Orlando Delgado**  
Requestor's Name  
**328 Minorca Avenue**  
Address  
**Coral Gables, FL 33134**  
City State ZIP Phone  
**(305) 774-6461**

VALIDATION ONLY

400002951694--9  
-08/17/99--01029--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

CORPORATION(S) NAME

**Peninsula Dental Corporation**

99 AUG 17 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**FILED**

**Empire Toll Free: 1-800-432-3028**

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| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Foreign                | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Dissolution            | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reservation               | <input type="checkbox"/> Certificate Under Seal |   |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies           |   |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30                 |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up         |
|  |   | <input type="checkbox"/> Mail Out                   |

Name	
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**cert. copy**

99 AUG 17 AM 9:42  
RECEIVED

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99 AUG 17 AM 11:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**PENINSULA DENTAL CORPORATION**

I/We, the undersigned subscriber(s) of these Articles of Incorporation, a natural person, competent to contract and desiring to form a corporation under the laws of the State of Florida, hereby certify as follows:

**I**

The name of the proposed corporation is:

**PENINSULA DENTAL CORPORATION**

The Corporation may engage in any activity or business permitted under the laws of the United States, and of the State of Florida.

**III**

The maximum number of shares of stock which the corporation is authorized to have outstanding at any time shall be:

**60 SHARES**

**IV**

This corporation shall have perpetual existence beginning on the date of incorporation.

**V**

The principal business office of the corporation shall be located at:

**24940 SOUTH TAMiami TRAIL  
SUITE 202  
BONITA SPRINGS, FL 34134**

or at such other place as may later be designated by the Board of Directors, with branch offices in such other cities, towns, states, or countries as may, from time to time, be authorized by its Board of Directors.

## **VI**

The initial registered office address of this corporation shall be:

**328 MINORCA AVENUE  
CORAL GABLES, FL 33134**

and the Registered Agent at such registered address is:

**ORLANDO DELGADO**

## **VII**

The business of this corporation shall be conducted by a Board of Directors which shall consist of not less than one (1), and not more than nine (9) as shall from time to time be designated in the By-Laws of this corporation, and a majority thereof shall constitute a quorum for the transaction of all business.

## **VIII**

The name and street address of each person who is to serve as a member of the initial Board of Directors, who, subject to the provisions of these Articles of Incorporation, the By-Laws of this corporation and the laws of the State of Florida, shall hold office for the first year of corporate existence, or until their successors are elected and are duly qualified, are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
ORLANDO DELGADO	328 MINORCA AVENUE CORAL GABLES, FL 33134	
MARCO ANTONIO GARCIA	1000 S.W. 101 AVENUE CORAL GABLES, FL 33012	
OWEN FRANCIS FEENEY	25051 BALLY CASLTE COURT UNIT 202 BONITA SPRINGS, FL 34134	

## IX

The name and street address of each incorporator is:

<u>NAME</u>	<u>ADDRESS</u>
ORLANDO DELGADO	5191 PINE TREE DRIVE MIAMI BEACH, FL 33140

## X

The By-Laws of this corporation may be created, amended, or changed by either the Stockholders or the Directors at any regular or duly scheduled special meeting.

## XI

This corporation shall have, in addition to a President, Vice President, Secretary and/or Treasurer, such other additional officers as may be created from time to time by and under the authorization of its By-Laws.

## XII

All officers, agents and factors shall be chosen in such manner, hold their offices for such terms, and have such powers and duties as may be prescribed by the By-Laws or determined by the Board of Directors. Any person may hold two or more offices.

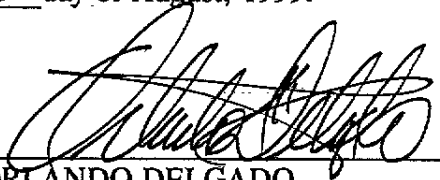
## XIII

Every person who now is or hereafter shall become Directors of this corporation shall be indemnified by the corporation against all costs and expenses (including attorney's fees) hereafter reasonably incurred by or imposed upon him in connection with, or resulting from any action, suit or proceedings of what ever nature, to which he is or shall be made part by reason of his being or having been a Director of the corporation whether or not he is a Director of the corporation at the time he is made a party to such action, suit or proceeding, or at the time such cost or expense is incurred by or imposed upon him.

However, an exception is made to the above in relation to matters as to which he shall finally be adjudged in such action, suit or proceedings, to have been derelict in the performance of the duties imposed upon him as such Director.

The right of indemnification herein provided shall not be exclusive of other rights to which any such person may now or hereafter be entitled as a matter of law.

**IN WITNESS WHEREOF**, the undersigned has made, subscribed and acknowledged these Articles of Incorporation this 13<sup>th</sup> day of August, 1999.

  
\_\_\_\_\_  
ORLANDO DELGADO

**CERTIFICATE DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS  
UPON WHOM PROCESS MAY BE SERVED**

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In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

That PENINSULA DENTAL CORPORATION desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Certificate of Incorporation, County of Miami-Dade, State of Florida, has named: ORLANDO DELGADO Whose Address is: 328 MINORCA AVENUE, CORAL GABLES, FL, 33134, as its agent to accept service of process within this State.

**ACKNOWLEDGMENT BY DESIGNATED AGENT**

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

  
**ORLANDO DELGADO**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

99 AUG 17 AM 11:24

**FILED**