

PP9000106300

COVER LETTER

FROM:

Emilio Martinez, D.D.S., P. A.
5110 Turnpike Feeder Road
Fort Pierce, FL 34951-2023

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-12/06/99--01088--013
*****70.00 *****70.00

DEAR CORPORATIONS DIVISION:

Please find enclosed for the above named corporation:

1. Articles of Incorporation.
2. Certificate of Designation of Registered Agent
3. A check or money order in the amount of \$ 70.00 for filing fees.

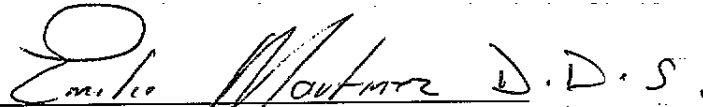
Please send filed copies to the address above.
Thank you very much.

November 30, 1999

Name of Incorporator: Emilio Martinez

Address of Incorporator: 1202 SW Live Oak
Port St. Lucie, FL 34986

Telephone of Incorporator 561-465-3443


Signature of Incorporator

FILED
99 DEC -6 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T BROWN DEC - 8 1999

STATE OF FLORIDA
ARTICLES OF INCORPORATION
OF
Emilio Martinez, D.D.S., P. A.

FILED
99 DEC -6 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purpose of forming a for-profit corporation.

Article 1. The name of the Corporation is: Emilio Martinez, D.D.S., P.A.

Article 2. The principal place of business and mailing address of this corporation is: 5110 Turnpike Feeder Road
Fort Pierce, FL 34951-2023

Article 3. The corporation is authorized to issue one class of stock, that being 500 shares of one-dollar par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

Article 4. The name and address of the corporation's initial registered agent is: Emilio Martinez
1202 SW Live Oak
Port St. Lucie, FL 34986

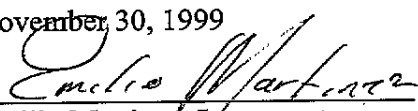
Article 5. The name and street address of the incorporator of this corporation is: Emilio Martinez
1202 SW Live Oak
Port St. Lucie, FL 34986

Article 6. No director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach result of self-dealing, intentional misconduct, or illegal actions.

Article 7. The primary purpose or business of the corporation is:
Dental Practice.

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date below. The undersigned incorporator hereby declares, under penalty of perjury, that the statements made in the forgoing Articles of Incorporation are true, and that the incorporator is at least eighteen years of age.

November 30, 1999


Emilio Martinez, Incorporator

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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: Emilio Martinez, D.D.S., P. A.

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

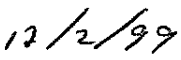
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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related 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)



(Date)