BEFORE THE GEORGIA STATE BOARD OF

DENTISTRY

	DE	NTISTRY	The state of the s
			Min-Stalaum dicchertes BOARCE
IN THE MATTER OF:	:		1
Henry Hudson	:	DOCKET NO.	1 - 100 × 0 7035
	;		302 - 11 1111
Respondent	<u> </u>		2/05-1057
WOY	TIMPE A DAY COD A	ASE AND DESIST ORDER	NO TOTAL STATE OF THE PARTY OF
701	JUNIARI CEA	ase and design values	
Respondent, who resides	s at / who operate	es his / her business at _3640 (Chambiee Tucker Road
Chamblec, GA	, currently	y does not possess a license to	practice as a (an):
Dentist	·····	in the State of Georgie	, pursuant to the Official
Code of Georgia Annotated (O.	C.G.A.), Title 43,	, Chapter 11, as amended. Po	tential violations of this
part of O.C.G.A. have been en	alled to Respon	dent's attention. Responden	t bas consented to this
Order and agrees to voluntarily	cease and desist	from any act or practice that	requires licensure
under Title 43, Chapter _11_, O	.C.G.A., as amer	nded, until such time as Respo	ndent becomes
properly Scensed by the Board.			
Respondent freely, know	vingly and volun	tarily waives the right to a her	aring in this matter.
Respondent understands that, s	hould Responder	at apply for licensure with the	Board, the Board bas
access to this Order and the ent	ire investigative	file in this matter.	
This order is effective up	pon approval by:	:Georgia Board of Dentistr	y
		and docketing with	the Division Director,
Professional Licensing Boards.	The Order shall	remain in effect until such tie	ne as Respondent is
properly licensed with the Boar	d, or until furthe	er order. Respondent underst	ands this order is a public
record and evidence of the final	disposition of ar	ry proceedings presently before	re the Board.
Any violation of this Cer	ase and Desist Or	rder shall subject Respondent	to a fine of not less than

\$500.00 nor more than \$1,000.00 or by imprisonment from two to five years, or both for each transaction constituting a violation thereof, pursuant to O.C.G.A. § 43-1-20.1.

Continued on back

Belly & Surfa)	
Name of agent / inspector serving of	locoment	
5/02/05 Date document served		
CONSENTED TO: SIGNATURE OF RESPONDENT	dson	
Sworn to and subscribed before me, this_	day of M	200 5.
NOTARY PUBLIC My commission expires: Notary Public DeKalb County, Georgia My Contrassion Expires Nov. 5, 2008		
WHITE OF OF ONLY	APPROVED BY:	Clark Carroll, DMD
GEODA STATE OF THE		CHAIRPERSON
GEOSA STATE OF THE PARTY OF THE	ATTESTED TO:	Mollie L. FLEEMAN
		MOLLIE 1. PLEEMAN DIVISION DIRECTOR