



F00000001855

FILED IN STATE
SECRETARY OF CORPORATIONS
00 MAR 23 PM 3:19

ACCOUNT NO. : 072100000032
REFERENCE : 629330 7208028
AUTHORIZATION : Patricia Pizeto
COST LIMIT : \$ 70.00

ORDER DATE : March 17, 2000

ORDER TIME : 11:58 AM

ORDER NO. : 629330-010

CUSTOMER NO: 7208028

500A000011e293

900003181759--7

CUSTOMER: Mr. Charles P. Hauck Jr.
Mr. Charles P. Hauck Jr.
8670 Ashbury Drive

Bayonet Point, FL 34667

FOREIGN FILINGS

6

NAME: DENTAL PROFESSIONAL SERVICES,
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 MAR 23 PM 12:53

RECEIVED

B/K
4/3/00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 23, 2000

TAMARA ODOM
CSC NETWORKS
TALLAHASSEE, FL

SUBJECT: DENTAL PROFESSIONAL SERVICES, INC. which will conduct business in Florida using the name PRO-MAL CONSULTANTS, INC.
Ref. Number: W00000007878

We have received your document for DENTAL PROFESSIONAL SERVICES, INC. which will conduct business in Florida using the name PRO-MAL CONSULTANTS, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

As discussed, the name DENTAL PROFESSIONAL SERVICES, INC. is not available in Florida, and this Delaware corporation will have to adopt an ALTERNATE CORPORATE NAME FOR USE IN FLORIDA.

The name PRO-MAL CONSULTANTS, INC. will be fine as an ALTERNATE NAME, but they must submit a signed Resolution of the Board of Directors adopting the name. They may use the attached RESOLUTION FORM.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 500A00016293

RESUBMIT

Please give original submission date as filed date

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DIVISION OF CORPORATIONS
00 MAR 23 PM 3:19

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 APR -4 PM 12:59

RESOLUTION OF BOARD OF DIRECTORS
(Please print or type)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR 23 PM 3:19

I, the undersigned Charles P. Hauck Jr., do hereby certify
(Name)

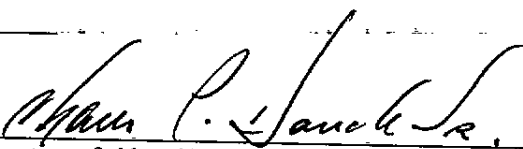
that this Resolution of the Board of Directors of Dental Professional
Services, Inc.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Delaware,
was duly adopted on April 3, 2000.

Be it resolved, that Dental Professional Services, Inc.
(Corporate Name)

organized and existing in the State of Delaware, hereby adopts the name
Pro-Mal Consultants, Inc. for use in Florida.

Dated: 4/3/2000


Signature of either Chairman, Vice Chairman or any officer

Charles P. Hauck Jr.
Type or print Name

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
00 MAR 23 PM 3:19

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Dental Professional Services, Inc., doing business in Florida

1. as Pro-Mal Consultants, Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE

(State or country under the law of which it is incorporated)

APPLIED FOR

3.

(FEI number, if applicable)

4. 3/13/2000

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON FILING

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 8670 Ashbury Drive, Bayonet Point, FL 34667

(Current mailing address)

8. To sell malpractice insurance to Dentists

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida, 32301
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: [Signature]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Charles P. Hauck Jr.

Address: 8670 Ashbury Drive, Bayonet Point, Fl. 34667

Vice Chairman: _____

Address: _____

Director: Regina E. Hauck

Address: 8670 Ashbury Drive, Bayonet Point, Fl. 34667

Director: _____

Address: _____

DIVISION OF COMMUNITY DEVELOPMENT
00 MAR 23 PM 3:19

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Charles P. Hauck Jr.

Address: 8670 Ashbury Drive, Bayonet Point, Fl. 34667

Vice President: _____

Address: _____

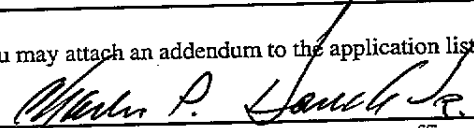
Secretary: Regina E. Hauck

Address: 8670 Ashbury Drive, Bayonet Point, Fl. 34667

Treasurer: Regina E. Hauck

Address: 8670 Ashbury Drive, Bayonet Point, Fl. 34667

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Charles P. Hauck Jr. Chairman
(Typed or printed name and capacity of person signing application)

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DENTAL PROFESSIONAL SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MARCH, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DENTAL PROFESSIONAL SERVICES, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF MARCH, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

00 MAR 23 PM 3:19
DIVISION OF CORPORATIONS
SECRETARY OF STATE



Handwritten signature of Edward J. Freel

Edward J. Freel, Secretary of State

3192257 8300
001143455

AUTHENTICATION: 0329513
DATE: 03-22-00