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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2010

VITO CLAVELLI 70 JACKSON DRIVE CRANFORD, NJ 07016

SUBJECT: TRI-STATE DENTAL, INC.

Ref. Number: W10000043826

We have received your document for TRI-STATE DENTAL, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 610A00022216

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Tri-Stats Dental, Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Vito Clavelli
Name of Person
Tri-Stats Dental, Inc.
Firm/Company
70 Jackson Drive
Address
Cranford, NJ 07016
City/State and Zip code
VitoC@TriStateDental.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bob Pisaeno at (908) 653-1180 x114
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Construction Comparison Clifton Section Compositions P.O. Box 6327 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \text{\$78.75 Filing Fee & Certified Copy}\$\$ Certificate of Status & Certified Copy \$87.50 Filing Fee, Certified Copy Certified Copy

IN SEP 29 PHI2: 46

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

١.	Tri-State Dental, Inc.
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	NJ 3. 223-332-059
	(State or country under the law of which it is incorporated) (PEI number, if applicable)
4.	9/23/1994 5. Perpetual
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	12/2008
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7	4544 N. Hiatus Road Sunrise, FL 33351
	(Principal office address)
	4544 N. Hiatus Road Sunrise, FL 33351
	(Current mailing address)
8.	The sale & service of dental supplies & equipment
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
€.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
	Name: Christina Manfredonia
Эf	fice Address: 4544 N. Hiatus Road
	Sunrise , Plorida 33351
	(City) (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.

(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.

A. DIRECTORS Chairman: Vito Clavelli (C. E. O.) Address: 70 Jackson Drive Cranford, NJ 07016 Vice Chairman: Address:
Address: 70 Jackson Drive Cranford, NJ 07016 Vice Chairman:
Cranford, NJ 07016 Vice Chairman:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Addivisa
B. OFFICERS President: Frank Clavelli

Address: 70 Jackson Drive
Cranford, NJ 07016
Vice President:
Address:
Scoretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
3
(Signature of Director or Officer listed in number 12 of the application)
4. Vito Clavelli (C. E. O.) (Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY LONG FORM STANDING WITH OFFICERS AND DIRECTORS

TRI-STATE DENTAL, INC.

0100601165

I, the Treasurer of the State of New Jersey, do hereby certify that the above named New Jersey Demostic B. G. G. above-named New Jersey Domestic Profit Corporation was registered by this office on September 23, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Frank Clavelli 70 Jackson Dr Cranford, NJ 07016

I further certify that the incorporator is:

R W Worthington 105 N Watts St Philadelphia, PA 19107

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on: September 21, 2009.

President

Frank Clavelli

2078 Pennington Road

Ewing, NJ 08618

Vice President

Vito Clavelli

938 Kennedy Blvd Bayonne, NJ 07002

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY LONG FORM STANDING WITH OFFICERS AND DIRECTORS

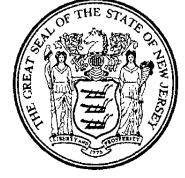
TRI-STATE DENTAL, INC.

0100601165

10 SEP 29 PM 12:

SECRETARY OF STATE DIVISION OF CORPORATIONS

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 8th day of September, 2010



Certification# 118154824

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

Andrew P Sidamon-Eristoff

Acting State Treasurer