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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : PREMIER MANAGEMENT HOLDINGS, INC.
Account Number : I20010000196
Phone : (561) 347-9773
Fax Number : (561) 347-9810

AL

FOREIGN PROFIT QUALIFICATION

MicroDenteX, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JAN 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JAN 11 PM 12:24

RECEIVED

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re : MICRODENTEX, INC.

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

MICHAEL TOWNER
(Name of Person)
PREMIER MANAGEMENT HOLDINGS INC
(Firm/Company)
1877 S. FEDERAL HWY #308
(Address)
BOCA RATON FL 33432
(City/State and Zip code)

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TALLAHASSEE, FLORIDA
02 JAN 11

For further information concerning this matter, please call:

MICHAEL TOWNER at (561) 347 9773
(Name of Person) (Area Code & Daytime Telephone Number)

Sincerely,


Nicholas Merry

Enclosed is a check for the following amount:

\$87.50 - Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

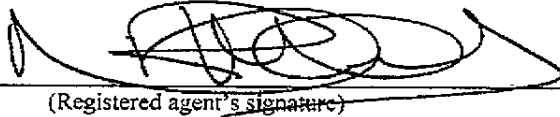
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE
OF FLORIDA.

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TALLAHASSEE, FLORIDA
02 JAN 11

1. MICRODENTEX, INC.
(Name of Corporation)
2. STATE OF NEVADA
(State incorporated)
3. Applied for
(FEI number)
4. JULY 6, 2000
(Date of Incorporation)
5. PERPETUAL
(Duration of Corporation)
6. Upon Qualification
7. 1155 W. 4th Street, #214, Reno, NV 89503
(Principal Office address)
- 17222 Alico Center Road, #2, Fort Myers, FL 33912
(Current mailing address)
8. Dental Diagnostics
(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: NICHOLAS MERRY
Office address: 17222 ALICO CENTER RD #2
FORT MYERS, Florida 33912
(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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: NICHOLAS MERRYAddress: 17222 ALICO CENTER RD #2
FORT MYERS FL 33912

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA
02 JAN 11

B. OFFICERS

President: NICHOLAS MERRYAddress: 17222 ALICO CENTER RD #2
FORT MYERS FL 33912

Vice President: _____

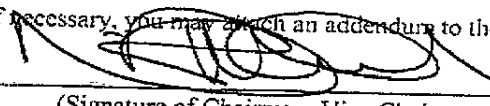
Address: _____

Secretary: NICHOLAS MERRYAddress: 17222 ALICO CENTER RD #2 FORT MYERS FL 33912

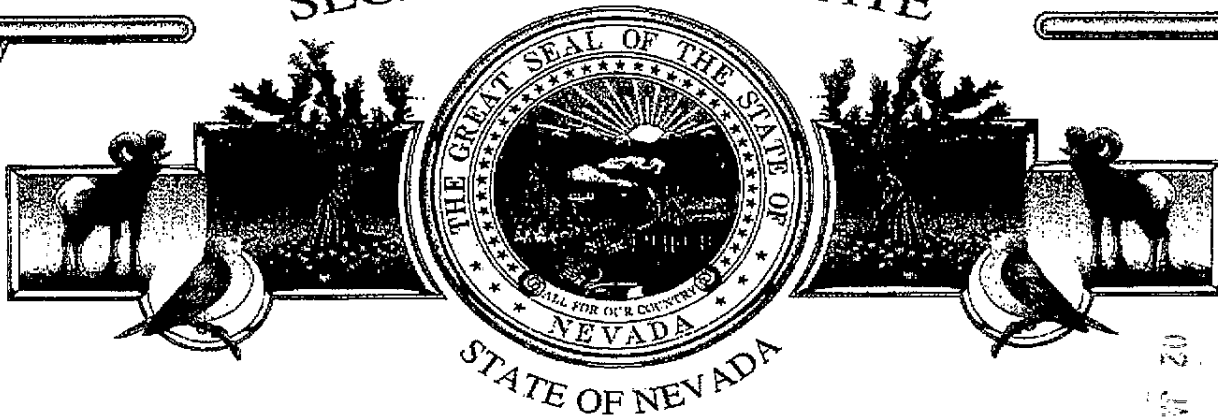
Treasurer: _____

Address: _____

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. NICHOLAS MERRY PRESIDENT
(Typed or printed name and capacity of person signing application)

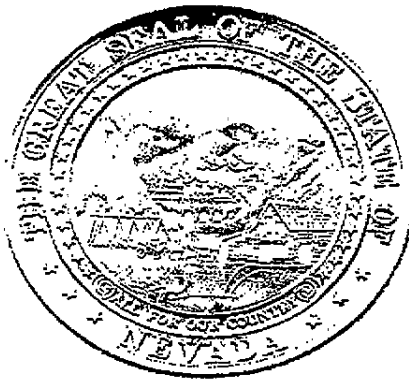
SECRETARY OF STATE

CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MICRODENTEX, INC.**, as a corporation duly organized under the laws of **NEVADA** and existing under and by virtue of the laws of the State of Nevada since **JULY 6, 2000** and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on November 1, 2001.



Dean Heller

Secretary of State

By

Annette Nye

Certification Clerk