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LIGHTARY OF STATE TALLAHASSEE, FLORIDA TO: Registration Section Division of Corporations SUBJECT: Affordable Dentures Dental Laboratories, 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", 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: Karen Franklin/Corporate Department (Name of Person) Affordable Care, Inc. (Firm/Company) Post Office Box 1042 (Address) Kinston, NC 28503 (City/State and Zip code) For further information concerning this matter, please call: Karen Franklin at (252 (Area Code & Daytime Telephone Number) (Name of Person) STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines St. Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount:

🗷 \$78.75 Filing Fee &

Certified Copy

☐ \$70.00 Filing Fee

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Certificate of Status

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMINIED TO PM 2: 06 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1 - Affindable De	ntures Dental <u>Lab</u> oratories, Inc.			JALLAHASSEE, FLORIDA		
(Name of corpo words or abbre	oration; must include the word "INCORPOR viations of like import in language as will cloor partnership if not so contained in the name	arly	ED", "COMPANY", "CORPORATION" v indicate that it is a corporation instead o	or		
2. North Carolina	·	3.	56-1678938			
(State or country	y under the law of which it is incorporated)	=	(FEI number, if applicable	le)		
4. 1-2-90		5	Perpetual			
(Da	te of incorporation)		(Duration: Year corp. will cease to exist	st or "perpetual")		
6. Upon Qualifica						
(Date first trans	acted business in Florida. If corporation has (SEE SECTIONS 607.1	not 501	transacted business in Florida, insert "up, 607.1502 and 817.155, F.S.)	on qualification.")		
7. 4990 Highway	70 West, Kinston, NC 28504			<u>- · </u>		
(Principal office address)						
Post Office Box	x 1042, Kinston, NC 28503		<u> </u>			
(Current mailing address)						
 8. Dental Lab Services (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> acceptable) 						
Name:	C T Corporation System			•		
Office Address:	1200 South Pine Island Road,					
	Plantation,		, Florida 33324			
	(City)		(Zip code)			
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appa comply with the provisions of all status familiar with and accept the obligation	inti tes i ns q	ment as registered agent and agree to relative to the proper and complete p of my position as registered agent.	o act in this capacity. I		
Вз			man Farnell, V	ice President		
(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	FILED		
,	03 APR 29 PM 2: 06		
Chairman:	DEUNE LARY OF STATE		
Address:	SEUNE LARY OF STATE FALLAHASSEE, FLORIDA		
Vice Chairman:			
Address:			
Director: George L. Edwards, Jr.			
Address: Post Office Box 1042	<u> </u>		
Kinston, NC 28503	<u> </u>		
Director: Donald L. Henson			
Address: Post Office Box 1042			
Kinston, NC 28503			
B. OFFICERS			
President: George L. Edwards, Jr.	<u></u>		
Address: Post Office Box 1042			
Kinston, NC 28503			
Vice President: G. Timothy Pate			
Address: Post Office Box 1042			
Kinston, NC 28503			
Secretary: Donald L. Henson			
Address: Post Office Box 1042, Kinston, NC 28503	<u> </u>		
Treasurer: G. Timothy Pate			
Address: Post Office Box 1042, Kinston, NC 28503			
NOTE: If necessary, you may attach an addendum to the application listing additional actions and the second			
14. George L. Edwards, Jr., President	•• /		
(Typed or printed name and capacity of person signing ap	olication)		



NORTH CAROLINA

Department of The Secretary of State

SEUNETARY OF STATE TALL AHASSEE EL DOINA

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

AFFORDABLE DENTURES DENTAL LABORATORIES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of January, 1990, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Certification Number: 6792906-1 Page: 1 of 1 Ref.#
Verify this certificate online at www.secretary.state.nc.us/Verification.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 9th day of April, 2003.

Claime J. Maushall.
Secretary of State