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To:

Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCR000000023
Phone : (850) 222-1092
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FOREIGN PROFIT/NONPROFIT CORPORATION

Americus Dental Labs, Inc.

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06 JAN 19 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 20 2006

**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.*

1. Americus Dental Labs, 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. Delaware 3. 11-3413102
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11-14-1997 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 150-15 Hillside Avenue, Jamaica, NY 11432
(Principal office address)
150-15 Hillside Avenue, Jamaica, NY 11432
(Current mailing address)

8. Custom made fixed & removable prosthetic appliances, including dentures,
crowns and fixed bridges
(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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System

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

JOYCE A. GILBERT
ASSISTANT SECRETARY

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: See attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: George Benson

Address: c/o Americus Dental Labs, Inc.

150-15 Hillside Avenue, Jamaica, NY 11432

Vice President: Randy Marcus

Address: c/o Americus Dental Labs, Inc.

150-15 Hillside Avenue, Jamaica, NY 11432


Secretary: Randy Marcus

Address: c/o Americus Dental Labs, Inc., 150-15 Hillside Avenue, Jamaica, NY 11432

Treasurer: Randy Marcus

Address: c/o Americus Dental Labs, Inc., 150-15 Hillside Avenue, Jamaica, NY 11432

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Randy Marcus, Vice President, Secretary and Treasurer
(Typed or printed name and capacity of person signing application)

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

A. DIRECTORS

Chairman: George Benson
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Director: Christopher Pike
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Director: Gabriel Gomez
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Director: Gerard Moufflet
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Director: Harvey Bocian
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Director: Thomas McAndrews
Address: c/o Americus Dental Labs, Inc.
150-15 Hillside Avenue
Jamaica, NY 11432

Delaware

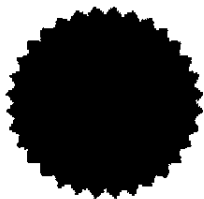
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERICUS DENTAL LABS, 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 EIGHTEENTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2823485 8300

AUTHENTICATION: 4455354

060047883

DATE: 01-18-06