

F22 000006695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

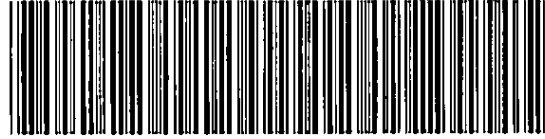
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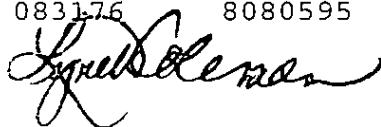
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2022 OCT 28 PM 4:03

OCT 31 2022
K. Brumley

0:00

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 083176 8080595
AUTHORIZATION : 
COST LIMIT : \$ 70.00

ORDER DATE : October 27, 2022
ORDER TIME : 1:28 PM
ORDER NO. : 083176-005
CUSTOMER NO: 8080595

FOREIGN FILINGS

NAME: DOMINION DENTAL SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

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. Dominion Dental Services, 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. Virginia 3. 54-1808292
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/19/1996 5. Perpetual
 (Date of incorporation) (Date of duration, if other than 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. 251 18th Street South, Suite 900 Arlington, VA 22202
 (Principal office street address)

P.O. Box 21522, Eagan, MN 55121
 (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
 (City) (Zip code)

APPROVED AND FILED
 2022 OCT 28 AM 11:05
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

9. 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: Eyleima Bahor
 Assistant Vice President
 (Registered agent's signature)

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Toliver Ralph Woodard
 Vice Chairman Address: 251 18th Street South, Suite 900
 Director Arlington, VA 22202
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Renae Kluk Kiehl
 Vice Chairman Address: 251 18th Street South, Suite 900
 Director Arlington, VA 22202
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Michael J. Davis Jr.
 Vice Chairman Address: 251 18th Street South
 Director Suite 900
 President Arlington, VA 22202
 Vice President _____
 Secretary Treasurer
 Other COO Other _____

Chairman Name: Glenn P. Heisey
 Vice Chairman Address: 251 18th Street South, Suite 900
 Director Arlington, VA 22202
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: April Wilbert
 Vice Chairman Address: 251 18th Street South
 Director Suite 900
 President Arlington, VA 22202
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Todd A. Shamash
 Vice Chairman Address: 251 18th Street South, Suite 900
 Director Arlington, VA 22202
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. 
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Michael J. Davis Jr. - COO
 (Typed or printed name and capacity of person signing application)

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

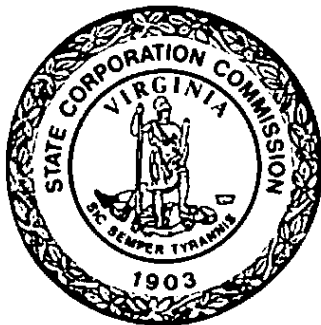
That Dominion Dental Services, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on June 19, 1996;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

October 28, 2022

A handwritten signature in black ink, appearing to read "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission