F99000000654

| To: Qualification/Tax Lien Section Division of Corporations | - · · · · · · · · · · · · · · · · · · · |
|--|--|
| SUBJECT: Smile America, (Name of corporation | INC. |
| (Name of corporation | |
| Dear Sir or Madam: | 700002741247 -01/14/9901034001 *****87.50 ******87.50 |
| The enclosed "Application by Foreign Corporation for A "Certificate of Existence", and check are submitted to reto transact business in Florida. | gister the above referenced foreign corporation |
| Please return all correspondence concerning this matter MARK E. Cook | |
| (Name of | Person) |
| MARK E. Cook (Name of the America, 1) (Firm/Con | INC, |
| (Firm/Con | npany) |
| 2121 CORPORATE 5 | 9. BINd. #230 |
| (Addre | ess) g $\leq_{\mathcal{S}}$ |
| Z121 CORPORATE S (Address F) (City/Stall) | 32216 FEB SIGNE |
| (City/Stat | re/Zip) |
| | |
| Should you need to call someone concerning this matter | r, please call: PM Solution Right Solution PM Solution Right Solution Rig |
| MARK E. Cook at (904) (Name of Person) (Area Cook) | 725-6564 5 ATTEMPT |
| (Name of Person) (Area (| Code & Daytime Telephone Number) |
| | \$\tap 2/3 |
| STREET ADDRESS: | MAILING ADDRESS: |
| Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 | Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| Enclosed is a check for the following amount: | • |
| ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ Certificate of Status | \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy |



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 14, 1999

MARK E. COOK SMILE AMERICA, INC. 2121 CORPORATE SQ. BLVD. #230 JACKSONVILLE, FL 32216

SUBJECT: SMILE AMERICA, INC. Ref. Number: W99000001061

SECRETARY OF STATE OF

We have received your document for SMILE AMERICA, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

You have submitted a certified copy of the corporation's articles. What we require for our filing purposes is a certificate of existence or good standing.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 699A00001966

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

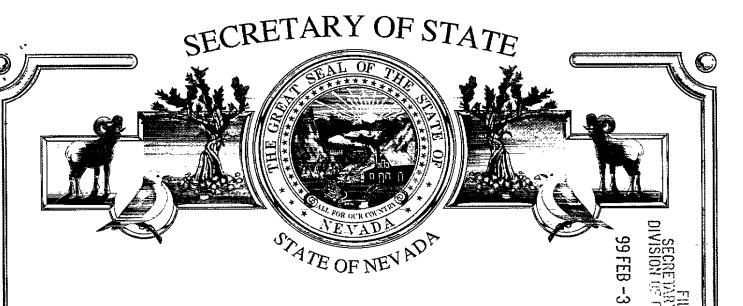
| | USINESS IN THE STATE OF FLORIDA. | |
|--|--|-----------------|
| Smile America, INC. | enter a | |
| (Name of corporation; must include the word "INCORPORATEI words or abbreviations of like import in language as will clearly in natural person or partnership if not so contained in the name at property of the property of th | D", "COMPANY", "CORPORATION" or indicate that it is a corporation instead of a | |
| (State or country under the law of which it is incorporated) | 3. <u>59-3541429</u> | - · · · · · · |
| 12 - 7- 90 | (rei number, ir applicable) | |
| /2 - 7 - 98 5. (Duration) (Duration) | tion: Year corn will come to eviate a " | <u>ა ⊒</u> ა |
| (Date first transacted business in Florida.) (SEE SECTIONS | | SION SION |
| (Date first transacted business in Florida.) (SEE SECTIONS | S 607.1501, 607.1502 and 817.155, F.S.) | <u>고 워</u> 롯- |
| 2121 CORPORATE Square Blud. | Suite 230 | 2 20E |
| 2121 CORPORATE Square Blud. JACKSONVILLE, FI 322. (Current mailing address) | 16 | 25 ST |
| (Current mailing address) | Og Marie ages | <u>5</u> |
| Adversising Agency (Purpose(s) of corporation authorized in home state or coun | | ₩ |
| (Purpose(s) of corporation authorized in home state or coun | ntry to be carried out in state of Florida) | - |
| Name and street address of Florida registered agent: (F | P.O. Box or Mail Drop Box NOT acceptable) | |
| Name: MARK E. COOK, CPA | e de la companya del companya de la companya del companya de la co | |
| fice Address: 12217 LAShbrook CX | | |
| Incksonuille | , Florida. 32223 | |
| | (Zip code) | • • • |
| Registered agent's acceptance: | | |
| | | looian stad is |
| ving been named as registered agent and to accept service of pro application, I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper and complet obligations of my position as registered agent. | nt and agree to act in this canacity. I further some | to |

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

| A. DIRECTORS (Street address only - P.O. Box NOT acceptable) | |
|---|-----------------------------|
| Chairman: Jeff Rubin | • |
| Address: 168 AZALEA Point DRIVE | |
| Ponte Vedra Berch, FL 32082 | i |
| Vice Chairman: MARK E, GOOK | |
| Address: 12217 LAShbRook C4. | |
| JACKSONVIlle, FL 32223 | - |
| Director: | |
| Address: | |
| | |
| Director: | 9 |
| | SE VIS |
| Address: | B 28 |
| B. OFFICERS (Street address only - P.O. Box NOT acceptable) | <u> </u> |
| President: TEH RABIN | |
| Address 168 AZALOA Point DRIVE | _;; S1×3 S1×3 S1×3 |
| Address: 168 AZALEA Point DRIVE PONTE VEDRA BEACH, FL 32082 | ONS EN |
| Vice President: MARK E. Coo'K | |
| 12717 Inshbrook C+ | |
| Address: 12217 LAShbrook Ct. JACKSONVILLE FL 32223 | |
| Magai t Can'l | |
| 10017 / relaborate Ci | |
| Address: | |
| | |
| Treasurer: MARK F. COOK | |
| Address: 12217 CAShbrook ('4) | |
| JACKSONVIlle, FL 32223 | |
| 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. MARK E. GOK SCEPTARY TREASU | rer |
| (Typed or printed name and capacity of person signing application) | |



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

l, 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, and limited-liability partnerships 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, **SMILE AMERICA**, 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 December 7, 1998, 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 January 28, 1999.

Secretary of State

Joan Ce brief

- Certification Clerk