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CORPORATE
ACCESS,
INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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Prof. t

1.) Dental Associates at Walden Woods Inc
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

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3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

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00 JUL 27 AM 9:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



ARTICLES OF INCORPORATION
FOR
DENTAL ASSOCIATES AT WALDEN WOODS, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles Of Incorporation:

Article 1. The name of the corporation shall be:

DENTAL ASSOCIATES AT WALDEN WOODS, INC.

Article 2. The principal place of business and mailing address of this corporation shall be:

**512 East Alexander Street
Plant City, Florida 33566**

Article 3. The aggregate number of shares of stock that this corporation is authorized to issue and have outstanding at one time is:

**Ten Thousand (10,000) shares, all of which shall be
common shares with a par value of \$1.00.**

Article 4. The name and address of the initial registered agent is:

**Anthony Jackson, D.D.S.
512 East Alexander Street
Plant City, Florida 33566**

Article 5. The names and street addresses of the incorporators to these Articles of Incorporation are:

**Anthony Jackson, D.D.S.
512 East Alexander Street
Plant City, FL 33566**

**H. Randolph Valdez, D.M.D.
512 East Alexander Street
Plant City, FL 33566**

The undersigned have executed these Articles of Incorporation this 26th day of July, 2000.


ANTHONY JACKSON, D.D.S.


H. RANDOLPH VALDEZ, D.M.D.

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00 JUL 27 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the Laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida;

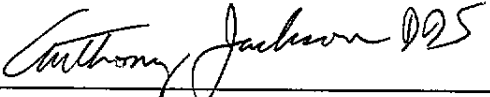
1. The name of the corporation is:

DENTAL ASSOCIATES AT WALDEN WOODS, INC.

2. The name and address of the registered agent and office are:

**Anthony Jackson, D.D.S.
512 East Alexander Street
Plant City, Florida 33566**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



ANTHONY JACKSON, D.D.S.

Dated: 7-26-00

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00 JUL 27 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA