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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

*****78.75

Subject: AV Dental, P.A.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

√ \$78.75 Filing Fee & Certified Copy

FROM:

Myrna Rodriguez 339 Heather Lake Dr. Orlando, Florida 32824

ARTICLES OF INCORPORATION OF AV Dental, P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following articles of incorporation.

The name of the Corporation shall be: AV Dental, P.A.

PRINCIPAL OFFICE ARTICLE II

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

2506 S. Semoran Blvd.

Conway Center

Orlando, Florida 32822

PURPOSE ARTICLE III

The specific purpose for which the corporation is being formed is: Dental Services

ARTICLE IV

The number of shares of stock is: 1,500

REGISTERED AGENT ARTICLE V

The name and Florida street address registered agent is:

Myrna Rodriguez 1339 Heather Lake Dr.

Orlando, Florida 32824

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Myrna Rodriguez

1339 Heather Lake Dr.

Orlando, Florida 32824

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.