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AUBIN WADE ROBINSON

Attorneys at Law

5 December 2000

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ODEC II AMII: 19

SECRETARY OF STATE
ASECRETARY F. FLORIDA

MAIL REPLY TO:

P. O. BOX 210425 ROYAL PALM BEACH, FL 33421 Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 32314

Subject:

The 24 Hour Emergency Dental Referral Service

Dear Clerk:

Enclosed please find an original and two (2) copies of the articles of incorporation and a check for \$87.50:

Filing Fees	\$ 35.00
Two Certified Copies	
	\$35.00
TOTAL	\$ 87.50

TELEPHONE:

561.333.8755

FAX: 561.791.7950

EMAIL: Aubin_Wade_Robinson@Juno.com Please return all documents to:

Chartered Law Firm of AUBIN WADE ROBINSON P. O. Box 210425 Royal Palm Beach, FL 33421

Tel:

561.333.8755

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Office Locations:

PALM BEACH:
Royal Plaza, Esplanade
505 Royal Palm Beach Blvd.
Royal Palm Beach, Florida

BROWARD:

Envirwood Executive Plaza, Suite 205 5950 West Oakland Park Blvd. Fort Lauderdale, Florida AUBIN WADE ROBINSON

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for purpose of forming a corporation under the FloridaTE Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be: The 24 Hour Emergency Dental Referral Service Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 505 Royal Palm Beach Blvd., Royal Palm Beach, FL 33411

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name of the initial registered agent is:

Aubin Wade Robinson, 505 Royal Palm Beach Blvd., Royal Palm Beach, FL 33411

ARTICLE V: INCORPORATORS

The name(s) and addresses of the incorporators to this Articles of Incorporation is (are): Aubin Wade Robinson, 505 Royal Palm Beach Blvd., Royal Palm Beach, FL 33411

↑ THE UNDERSIGNED INCORPORATO ARTICLES OF INCORPORATION ON/	OR(S) HAS (HAVE) EXECUTED THESE 12/2/200
A	
Signature of Incorporator	Signature of Additional Incorporator
Printed Name of Incorporator	Printed Name of Additional Incorporator
the place designated in this certificate, I hereby accept in this capacity. I further agree to comply with the	service of process for the above stated corporation at of the appointment as registered agent and agree to act provisions of all statutes relating to the proper and iar with and accept the obligations of my position as
registered agent	

Wade Robinson, Registered Agent