



**HOLCHER & COMPANY, P.A.**  
Certified Public Accountants and Personal Financial Specialists  
AND AFFILIATED COMPANIES

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PO10000006654

December 22, 2000

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-12/27/00--01003--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

**Re: Vitadent Management Company, Inc.**

To Whom It May Concern:

Herewith enclosed are the Articles of Incorporation for Vitadent Management Company, Inc.

Also enclosed is check in the amount of \$78.75 to cover Filing Fees, Registered Agent Designation and Certified Copies.

Thank you for your assistance.

Sincerely,

HOLCHER & COMPANY

Max A. Holcher  
Partner

MAH/djp

Enclosures as Stated

FILED  
00 DEC 26 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION  
VITADENT MANAGEMENT COMPANY, INC.**

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

ARTICLE I

Name of the corporation shall: Vitadent Management Company, Inc.

ARTICLE II

Principal place of business and mailing address of the corporation:

P. O. Box 338  
Naples, Florida 34106

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares at \$1.00 par.

ARTICLE IV

Name and Florida street address of the initial registered agent:

Max A. Holcher  
1000 9th Street, North  
Suite 502  
Naples, Florida 34102

ARTICLE V

Name and address of the incorporator to these Articles of Incorporation:

Max A. Holcher  
396 Yucca Road  
Naples, Florida 34102

ARTICLE VI

Effective date of this corporation is 12-1-2002.

  
\_\_\_\_\_  
Signature/Incorporator

12.22-2002  
\_\_\_\_\_  
Date

FILED  
00 DEC 26 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent 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 am familiar with and accept the obligations of my position as Registered Agent.

  
Signature/Registered Agent

12-22-2006  
Date

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00 DEC 26 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA