

## TRANSMITTAL LETTER

P01000033943

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

SUBJECT: SMILEAGE PLUS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003931453--6  
-03/30/01--01061--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: MARSHA D. COULSON  
Name (Printed or typed)

7545 ADVENTURE AVENUE  
Address

NO. BAY VILLAGE FL 33141  
City, State & Zip

(305) 866-1042  
Daytime Telephone number

FILED  
2001 MAR 30 AM 9:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles.

4/4/01

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be: *SMILEAGE PLUS, INC.*

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2001 MAR 30 AM 9:16

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *7545 ADVENTURE AVENUE  
NO. BAY VILLAGE, FL 33141*

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *TO ENGAGE IN ANY LAWFUL  
ACTIVITIES UNDER THE LAWS OF THE STATE OF FLORIDA*

## ARTICLE IV SHARES

The number of shares of stock is: *24,000,000 TWENTY-FOUR MILLION SHARES OF COMMON  
STOCK WITH A \$0.001 PAR VALUE, AND ONE MILLION (1,000,000) SHARES  
OF PREFERRED STOCK WITH \$0.01 PAR VALUE.*

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*MARSHA D. COULTON, PRESIDENT/TREASURER  
MYRON A. COULTON, V.P./SECY.  
7545 ADVENTURE AVENUE  
NO. BAY VILLAGE, FL 33141*

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*MARSHA D. COULTON  
7545 ADVENTURE AVENUE  
NO. BAY VILLAGE, FLORIDA 33141*

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*MARSHA D. COULTON  
7545 ADVENTURE AVE.  
NO. BAY VILLAGE, FL 33141*

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*Marsha D. Coulton*  
Signature/Registered Agent

*3/28/01*  
Date

*Marsha D. Coulton*  
Signature/Incorporator

*3/28/01*  
Date