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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT CORPORATION OR P.A.

EL SHADAY DENTAL, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF INCORPORATION

OF
EL SHADAY DENTAL, CORP.
(ENGLISH: THE ALMIGHTY DENTAL CORP)

ARTICLE I - NAME

The name of the corporation shall be:

EL SHADAY DENTAL, CORP.

ARTICLE II - ADDRESS

The address of the principal office until further notice
is: 8660 NW 5 Terr. # 203, Miami, FL 33126.

ARTICLE III - CAPITAL STOCK

The number of shares that this corporation is authorized
to have outstanding is one thousand (1,000) common shares
at one (\$1.00) dollar par value.

ARTICLE IV - INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent of this corporation is: Juarez
Gabriel Faria and the registered office is 8660 NW 5 Terr.,
#203, Miami, FL 33126.

ARTICLE V - INCORPORATOR

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

Juarez Gabriel Faria
8660 NW 5 Terr. #203
Miami, FL 33126.

ARTICLE VI - DURATION

This corporation shall have a perpetual existence unless
dissolved according to law.

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ARTICLE VII - PURPOSE

The purposes for which this corporation is organized are:

- (a) To engage and transact any and all lawful business which corporations normally do within the state of Florida.
- (b) To operate any legal business at the wholesale or retail level (or both) including but not limited to an export-import, operation and a dental lab facility.

ARTICLE VIII - INDEMNIFICATION

This corporation shall indemnify any officer or director, or any agent, to the full extent permitted by law.

ARTICLE IX - INITIAL BOARD OF DIRECTORS

The business of this corporation shall be managed by a Board of Directors consisting of one or more members, the exact number to be determined from time to time in accordance with the By-Laws. The initial Board of Directors shall consist of two directors as follows:

Juarez Gabriel Faria	Director and President
	8660 NW 5 Terr. #203, Miami, FL 33126
Tania M.L. Rangel Santos	Treasurer
	8660 NW 5 Terr. #203, Miami, FL 33126

ARTICLE X - BY-LAWS

The Board of Director shall adopt By-Laws for this Corporation which may be amended, altered or repealed by the shareholders or directors in any manner permitted by law.

The undersigned incorporator has executed these Articles of Incorporation this 15 day of June 2001.

 : Juarez Gabriel Faria

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registererd agent, in the State of Florida.

1. The name of the corporation is _____

EL SHADAY DENTAL, CORP.

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

Juarez Gabriel Faria

Name _____

8660 NW 5 Terr. #203, Miami, FL 33126

Address _____

The following officer of this corporation has authorized the above person and office to be its registered agent and registered office.

Signature _____

Title _____

Date _____

President

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ACCEPTANCE BY AGENT

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 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

Signature _____

Date _____