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FILED  
01 AUG -9 AM 11:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 7, 2001

Corporate Records Bureau  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

900004527129--4  
-08/09/01--01053--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Re: The Wright Dental Lab, Inc.

Dear Sir/Madam:

Enclosed are the original and one copy of proposed Articles of Incorporation in reference to the captioned corporation. Also enclosed is a check in the amount of \$78.75 to cover the following:

Filing Fee	\$35.00
Certified Copy of Articles	8.75
Resident Agent Fee	<u>35.00</u>
	\$78.75

If the Articles of Incorporation meet with your approval, please execute and send me a certified copy of the Articles.

Respectfully yours,



David M. Andrews

DMA:vdh  
Enclosure

8-14-01  
WGC

ARTICLES OF INCORPORATION  
OF  
THE WRIGHT DENTAL LAB, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, LEA WRIGHT, hereby executes this document for the purposes of becoming incorporated under the laws of the State of Florida, and forming a corporation under the following proposed Certificate of Incorporation:

ARTICLE I

The name of this Corporation is THE WRIGHT DENTAL LAB, INC.

ARTICLE II

The general nature of the business to be transacted by the Corporation is as follows:

The Corporation may engage in any activity or business permitted by the Laws of the United States and of this State.

ARTICLE III

The maximum number of shares of stock that the Corporation is authorized to have outstanding at any time is 5,000 shares of common stock of the same class and at ten cents(10¢) par value.

ARTICLE IV

Every shareholder, upon the sale for cash of any stock of this Corporation of the same class as that which he already holds, shall have the right to purchase his pro-rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which it is offered to others.

ARTICLE V

The Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE VI

The Corporation is to have perpetual existence.

ARTICLE VII

The registered address and the principal office address of the Corporation in this State are: 63 White Court, St. Augustine Beach, Florida 32080, and the name of the initial registered agent of this Corporation at the registered address is: Lea Wright.

ARTICLE VIII

The number of Directors of this Corporation shall not be less than ONE or more than THREE.

ARTICLE IX

The name and post office address of the members of the first Board of Directors of the Corporation are:

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
Lea Wright	President	63 White Court St. Augustine Beach, FL 32080

ARTICLE X

The name and post office address of the subscribers to the Articles of Incorporation are:

<u>NAME OF SUBSCRIBER</u>	<u>ADDRESS</u>
Lea Wright	63 White Court St. Augustine Beach, FL 32080

ARTICLE XI

The power to adopt, amend, alter or repeal By-Laws shall be vested in the Board of Directors and the Shareholders.

IN WITNESS WHEREOF, the subscribers have hereunto set their hands and seals this 2nd day of August, 2001.

Lea Wright  
LEA WRIGHT

STATE OF FLORIDA

COUNTY OF ST. JOHNS

THE FOREGOING INSTRUMENT was acknowledged before me this 2nd day of August, 2001, by LEA WRIGHT, who is personally known to me or who produced FL W623-535-55-923-1 as identification, and who did/did not take an oath.

(SEAL)

Virginia D. Hoffman  
Notary Public  
Printed Name: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_



VIRGINIA D. HOFFMAN  
NOTARY PUBLIC, STATE OF FLORIDA  
MY Comm. Expires MAY 27, 2005  
COMM. # DD 017013

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED

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IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED:

FIRST -- THAT THE WRIGHT DENTAL LAB, INC., DESIRING TO  
ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH  
ITS PRINCIPAL PLACE OF BUSINESS IN THE CITY OF ST. AUGUSTINE,  
COUNTY OF ST. JOHN'S, STATE OF FLORIDA, HAS NAMED LEA WRIGHT,  
LOCATED AT 63 WHITE COURT, OF THE CITY OF ST. AUGUSTINE, COUNTY OF  
ST. JOHN'S, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF  
PROCESS WITHIN FLORIDA.

Signature: LEA WRIGHT  
Lea Wright  
(Corporate Officer)

Title: President

Date: 8/2/01

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I  
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY  
WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND  
COMPLETE PERFORMANCE OF MY DUTIES.

Signature: Lea Wright  
Resident Agent - LEA WRIGHT

Date: 8/2/01