

TRANSMITTAL LETTER

Department of
Division of Corporations
P. O. Box 3327
Tallahassee, FL 32314

SUBJECT: ADVANCED DENTAL TECHNOLOGIES, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: SCOTT D. JOHNSTONE
Name (Printed or typed)

ROSIEM. JOHNSTONE

725 S.E. PORT ST. LUCIE BLVD. STE 103
Address

PORT ST. LUCIE FL 34984
City, State & Zip

772-878-2044
Daytime Telephone number

600004952586--2
-02/19/02--01021--009
*****78.75 *****78.75

FILED
02 FEB 19 AM 9:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

1. **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:

ADVANCED DENTAL TECHNOLOGIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

725 S.E. PORT ST. LUCIE Blvd. STE 103
PORT ST. LUCIE, FL 34984

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DENTAL LABORATORY

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

SCOTT D. JOHNSTONE - PRESIDENT.
ROSIE M. JOHNSTONE - VICE PRESIDENT
3006 S.E. WAKE ROAD
PORT ST. LUCIE, FL 34984

ARTICLE VI REGISTERED AGENT

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

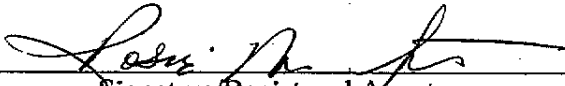
ROSIE M. JOHNSTONE
3006 S.E. WAKE ROAD
PORT ST. LUCIE, FL 34984

ARTICLE VII INCORPORATOR

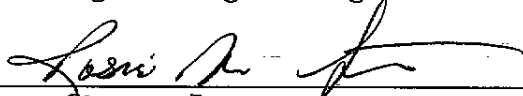
The name and address of the Incorporator is:

ROSIE M. JOHNSTONE
3006 SE WAKE ROAD
PORT ST. LUCIE, FL 34984

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


Signature/Registered Agent

2/14/02
Date


Signature/Incorporator

2/14/02
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA