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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT:	AMERI-ORTHO INTERNAT: (PROPOSED CORPORAT	•	UDE SUFFIX)	_
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	承来来来来 是"	0201025001
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	BETSY HARTSOCK Name (Printed or typed)	<u>.</u>	
-	11050 SW 88 ST #102			
	Address MIAMI, FL 33176			
	City, State & Zip			
	(305)271-6121			
	Daytime Telephone number			

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

= 8-12-00

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be:

AMERI-ORTHO INTERNATIONAL, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

11050 SW 88 STREET

The principal place of business/mailing address is UITE #102

MIAMI, FL ⁻ 33176

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Exporter for orthodontic materials

and equipment.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Betsy Hartsock, President

10020 SW 125 Avenue

Miami, FL 33186

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

Betsy Hartsock

c/o Ameri-Dent, Inc.

11050 SW 88 St. #102

Miami, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Same as above

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

gnature/Incorporator