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TRANSMITTAL LETTER

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

closed are an original strains are strained	ginal and one (1) copy of the ar \$78.75 Filing Fee	ticles of incorporation and \$78.75 Filing Fee	d a check for: \$87.50 Filing Fee,
ring rec	& Certificate of Status	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate of Status
FROM:	Robert E.	LONG e (Printed or typed)	
	11555 Hera	200 Bay	B(v), #)
	Conal Sc	Prints F y, State & Zip	Elovida 330
	954-603-	0480 Telephone number	

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

ARTICLES OF INCORPORATION OF BOCA DENTS, INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I NAME

SUM 9 MID: 33

BOCA DENTS, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS COPORATION SHALL BE:

130 NORTHWEST 20TH STREET BOCA RATON, FLORIDA 33431

ARTICLE III CAPITAL STOCK

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS ONE HUNDRED (100) SHARES HAVING A PAR VALUE OF ONE DOLLAR (1.00) PER SHARE.

ARTICLE IV INITIAL BOARD OF DIRECTORS

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS OF THIS CORPORATION IS ONE (1). THE NUMBER OF DIRECTORS MAY EITHER BE INCREASED OR DECREASED FROM TIME TO TIME BY AN AMENDMENT OF THE BY-LAWS BUT SHALL NEVER BE LESS THAN ONE (1). THE NAMES AND ADDRESSES OF THE INITIAL BOARD OF DIRECTORS ARE:

 RICHARD IMBIMBO 130 NORTHWEST 20TH STREET BOCA RATON, FLORIDA 33431

ARTICLE V INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

ROBERT E. LONG 11555 HERON BAY BLVD # 200 CORAL SPRINGS, FLORIDA 33076 These Articles of Incorporation Prepared by:
Robert E. Long
11555 Heron Bay Blvd # 200
Coral Springs, Florida 33076 P 954-603-0480

FILED

03 JAN -9 AM 10: 33

TALLAH TELORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

ROBERT E. LONG 11555 HERON BAY BLVD # 200 CORAL SPRINGS, FLORIDA 33076

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS DATE:

January 6th, 2003

ROBERT E. LONG, INCORPORATOR

<u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

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/REGISTERED ĀGENT, IN THE STATE OF FLORIDA.

- THE NAME OF THE CORPORATION IS BOCA DENTS, INC.
- 2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

ROBERT E. LONG, 11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FLORIDA 33076

SIGNATURE

TIFLE

NCORPORATOR

DATE: JANUARY 6TH, 2003

HAVING BEEN NAMED REGISTERED AGENT 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 AGREE 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.

REGISTERED AGENT

DATE: JANUARY 6TH, 2003