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SECRETARY OF SOLUTION O

4.15.03

TRANSMITTAL LETTER

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

SUBJECT:	ECT: DENTALWERKS INC.			
(Proposed corporate name - must include suffix)				
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
□ \$70.00	□ \$78.75	™ \$122.50	□ \$131,25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee.	
	& Certificate	& Certified Copy	~ /	
	•	•	& Certificate	
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FROM:	Name (Printed or typed)			
Name (Times of types)				
308 ARLINGTON ROAD				
Address				
City, State & Zip				
City, State & Zip				
Daytime Telephone number				

ARTICLES OF INCORPORATION

FILED

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SLOKETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

DENTALWEEKS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

JOS ARLINGTON ROAD WEST PALM BEACH, FL 33405

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DEBORA M HAHN. 308 ARLINGTON ROAD WEST PACM BEACK FL 33405

ARTICLE V INCORPORATOR

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

DEBORA M HAHN
308 ARLINGTON ROAD
WEST PALM BEACH FC 33405

K D. Lora M. Hahn

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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 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

V Deltora M. Hahr H-7-03
Signature/Registered Agent Date