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(Requestor's Name)

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(City/State/Zip/Phone #)

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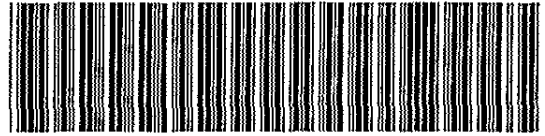
(Business Entity Name)

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**FLORIDA
TRUST
SERVICES**

One San Jose Place, Suite 17, Jacksonville, FL 32257

Email Address: ftsltd@aol.com

Telephone (904) 262-1311; FAX (904) 292-4221

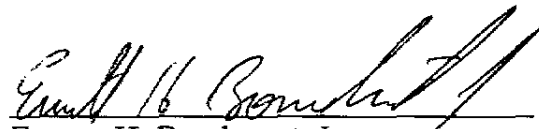
Everett H. Bondurant, Jr.
President and Sr. Trust Officer

June 17, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

SUBJECT: Prime Care Dental Center of Cocoa, Inc.

I enclose an original and one copy of the Articles of Incorporation for the above corporation and a check in the amount of \$122.50. Once the Articles are filed, please forward to me a certified copy of said Articles.



Everett H. Bondurant, Jr.
President and Sr. Trust Officer

From: Everett H. Bondurant, Jr.
One San Jose Place
Suite 17
Jacksonville, FL 32257
904-262-1311

ARTICLES OF INCORPORATION
OF
PRIME CARE DENTAL CENTER OF COCOA, INC.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I NAME

The name of the corporation shall be: Prime Care Dental Center of Cocoa, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3525 U.S. Highway 17
Orange Park, Florida 32003

ARTICLE III CAPITAL STOCK

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 ADDRESS

The name and address of the initial registered agent is:

Everett H. Bondurant, Jr.
c/o Florida Trust Services
One San Jose Place, Suite 17
Jacksonville, Florida 32257

ARTICLE V INCORPORATOR


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

Mary Rose Alon-Alon

3525 U.S. Highway 17

Orange Park, Florida 32003

The undersigned has executed these Articles of Incorporation this 20 day of June, 2003.



Mary Rose Alon-Alon
Incorporator

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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 agent, in the state of Florida.

1. The name of the corporation is:

Prime Care Dental Center of Cocoa, Inc.

2. The name and address of the registered agent and office is:

Everett H. Bondurant, Jr.

c/o Florida Trust Services

One San Jose Place, Suite 17

Jacksonville, Florida 32257

Signature: 
Mary Rose Alon-Alon

Title: Incorporator

Date: 6/20/2003

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.

Signature: _____

Everett H. Bondurant, Jr.

Date: _____

6/20/2003

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03 JUL -1 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA