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(Requestor's Name)
(Address)
(Ashtropa)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
Randall Talaski

AUTHORIZATION BY PHONE TO CORRECT COVP. NOW



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FFECTIVE DATE

09/08/03--01102--018 **78.75

FILED

SECRETARY OF STATE
SECRETARY OF STATE

W03-2613

TRANSMITTAL LETTER

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

SUBJECT:	DENTAL INSTITUTE FOR (PROPOSED CORPORA	· ·		
Enclosed is an origin	al and one(1) copy of the artic	les of incorporation and a	a check for:	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM		oming dale A	E-10-1	CTIVE DATE (0-01-03
	VA/rice City, 813-	2. 5 / 05 / 04 33, 8tate & Zip - 363 - 9589 Telephone number		

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

FILED

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SECRETARY OF STATE
TALLAHARST E. T. LARIF

ARTICLES OF INCORPORATION

OF

DENTAL INSTITUTE FOR ADVANCED TRAINING, INC.

LO-01-03

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

- 1. Name. The name of this corporation is DENTAL INSTITUTE FOR ADVANCED TRAINING, INC.
- 2. <u>Purpose and Powers.</u> This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is:

Conduce Training Semniars.

- 3. <u>Authorized Shares.</u> The corporation shall have the authority to issue 1000 shares of common stock. The par value of the stock is \$ 1.00.
- 4 <u>Principal Office and Mailing Address of Corporation.</u> The principal place of business and mailing address of the corporation shall be:

Principal Place of Business 4725 Bloomingdale Avenue

Valrico, Florida 33594 Mailing Address 4725 Bloomingdale Avenue Valrico, Florida 33594

5. <u>Initial Officers/Directors.</u> The initial Board of Directors shall consist of 1 persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

Randall V. Talaski 4725 Bloomingdale Ave. Valrico, Florida 33594 President

6. Registered Agent.

The name and Florida street address of the Registered Agent of the Corporation is:

Randall V. Talaski 4725 Bloomingdale Ave. Valrico, Florida 33594

7. **Incorporator.** The name and address of the incorporator is:

Randall V. Talaski 4725 Bloomingdale Ave. Valrico, Florida 33594

8. <u>Effective Date.</u> These Articles are to be effective the date of filing unless otherwise specified below:October 1, 2003

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: 9/3/03

ACCEPTANCE BY REGISTERED AGENT

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.

DATE: 9/5/03

Randall V. Talaski

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FILED

35CRETARY OF STATE