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aod dental clinic, inc.

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ARTICLES OF INCORPORATION
OF
AOD DENTAL CLINIC, INC.
a Florida corporation

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ARTICLE I. CORPORATE NAME.

The name of this corporation is: AOD DENTAL CLINIC, INC.

Corporate Address: 6140 SW 70 Street, 3rd Floor, Miami, FLORIDA 33143

ARTICLE II. NATURE OF BUSINESS.

This corporation may engage in any activity or business permitted under the laws of the United States of America and the laws of the State of Florida.

ARTICLE III. DURATION.

This corporation shall have perpetual existence unless sooner dissolved in accordance with the laws of the State of Florida. The date on which corporate existence shall begin is:

February 19, 2004

ARTICLE IV. CAPITAL STOCK.

This corporation is authorized to issue shares of stock as follows:

- A. Designation: The stock of this corporation shall be known as Common Stock
- B. Authorized: The maximum number of shares of Common Stock that this corporation may issue is: 500.
- C. Par Value: Each share of Common Stock shall have NO par value.
- D. Consideration: Shares of Common Stock may be issued in exchange for cash, real property, labor or services rendered, or any other combination of the foregoing. In the absence of fraud in the transaction, the judgment of the Board of Directors as to the value of any such consideration shall be conclusive.
- E. Non-assessability: Each share of Common Stock shall be issued in exchange for consideration which is at least equal to the par value thereof, and shall be fully paid and non-assessable.

Prepared By:
Orlando Rodriguez-Rams, Esq.
Bar No.: 0117005
9192 Coral Way - Suite 201
Miami, FL. 33165
Tel.: (305) 227-0727
Fax: (305) 227-1086

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F. Voting Rights: Each share of Common Stock shall entitle the record holder thereof, to one vote upon each proposal presented at meetings of the stockholders of the corporation.

G. Dividends: Record holders of Common Stock are entitled to receive their pro-rata share of any dividends that may be declared by the Board of Directors out of assets legally available for such purpose.

H. Liquidation Rights: Holders of Common Stock are entitled, in the event of liquidation or dissolution of this corporation, to receive their pro-rata share of any assets of this corporation remaining after payment of all corporate debts and obligations.

ARTICLE V. INITIAL REGISTERED AGENT AND OFFICE.

The street address of the Initial Registered Office of this corporation is: 9191 Coral Way, Suite 201, Miami, FLORIDA 33165, and the name of the Initial Registered Agent of this corporation at that address is ORLANDO RODRIGUEZ-RAMS, ESQ.

ARTICLE VI. DIRECTORS.

This corporation shall have initially ONE Director. The number of Directors may either increase or decrease, from time to time by the bylaws but shall never be less than one. The name and address of the Initial Director of this corporation is:

Abel O. De Anna, DMD Director, at: 6140 SW 70 Street, 3rd Floor, Miami, FLORIDA 33143

And the initial officers of this corporation shall be:

Abel O. De Anna, DMD President, at: 6140 SW 70th Street, 3rd Floor, Miami, FLORIDA 33143

Abel O. De Anna, DMD Vice-President, at 6140 SW 70th Street, 3rd Floor, Miami, FLORIDA 33143

Abel O. De Anna, DMD Treasurer, at 6140 SW 70th Street, 3rd Floor, Miami, FLORIDA 33143

ARTICLE VII. INITIAL SUBSCRIBER.

The name and address of the Initial Subscriber of these Articles of Incorporation is: ABEL O. DE ANNA, DMD at 6140 SW 70th Street, 3rd Floor, MIAMI, FLORIDA 33143.

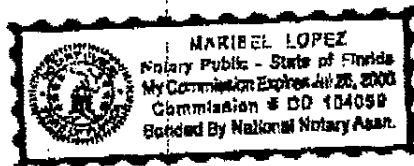
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 19th day of February, 2004.


Subscriber - ABEL O. DE ANNA, DMD

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared ABEL O. DE ANNA, DMD known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that she executed the same, that I relied upon the following form of identification of the above-named person: DL # 0500-014-38-364-0 and that an oath (was) (was not) taken.

Witness my hand and seal in the County and State last aforesaid this 19th day of February, 2004.




Notary Signature

Printed Notary Signature

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 617.0501, 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.

First - That AOD DENTAL CLINIC, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in these Articles of Incorporation has named ORLANDO RODRIGUEZ RAMS, ESQ. located at 9192 Coral Way, Suite 201, MIAMI, FLORIDA 33165 City of Miami, County of Miami Dade, State of Florida, as its agent to accept service of process within this state.

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: 

ORLANDO RODRIGUEZ RAMS, ESQ., as Registered Agent

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STATE OF FLORIDA)

) SS:

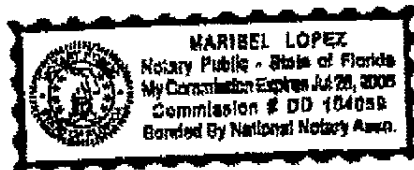
COUNTY OF MIAMI-DADE)

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared ORLANDO RODRIGUEZ-RAMS, ESQ., known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that she executed the same, that I relied upon the following form of identification of the above-named person: DL# R362640524160 and that an oath (was) (was not) taken.

Witness my hand and seal in the County and State last aforesaid this 19th day of FEBRUARY, 2004.


Notary Signature

Printed Notary Signature



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