P0500005593/

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TRANSMITTAL LETTER

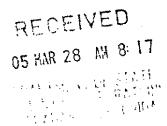
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

\$70,00

Filing Fee

□ \$78.75

Filing Fee



\$87.50

Filing Fee,

SUBJECT:	Mitchell Dental Arts Inc.
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM: K	aren A. Mitchell	- Old Jackson N	
	Name	e (Printed or typed)	
	241 22nd Street SE		
		Address	
	Naples, Fl., 34117	, State & Zip	
	(239) 216-5578	Telephone number	

\$78.75

Filing Fee

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



FLORIDA DÉPARTMENT OF STATE Glenda E. Hood Secretary of State

March 31, 2005

KAREN A. MITCHELL 241 22ND STREET SE NAPLES, FL 34117

SUBJECT: MITCHELL DENTAL ARTS INC.

Ref. Number: W05000016440

We have received your document for MITCHELL DENTAL ARTS INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

The corporate fees are as follows:

CORPORATIONS FILING FEES

Profit and NonProfit Florida & Foreign Corp.

Filing Fees	\$35.00
Registered Agent	
Designation	\$35.00
Certifed Copy	\$8.75
Certificate of Status	\$8.75

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Letter Number: 205A00022052

Loria Poole Document Specialist New Filings Section

Division of Cornerations - P.O. ROY 6397 Tallahagger Florida 29914

. Articles of Incorporation

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Article I Name

The name of the corporation shall be: Mitchell Dental Arts Inc.

Article II Principal Office

The principal place of business/mailing address is: 881 109th Avenue N. Naples, Fl., 34108



Article III Purpose

The purpose for which the corporation is organized is: To provide dental prosthetic devices to dentists and dental clinics. The corporation is further authorized to pursue other legal business interests as the stockholders deem appropriate.

Article IV Shares

The number of shares of stock is: 2000 shares with the number of shares divided as follows. 1000 shares preferred and 1000 shares common.

Article V Initial Officers

The name and address of the Initial officer is: **Karen A. Mitchell - President** 241 22nd Street SE Naples, Fl., 34117

Article VI Registered Agent

The name and address of the registered agent is: Karen A. Mitchell 241 22nd Street SE Naples, Fl., 34117

Article VII Incorporator

The name and address of the Incorporator is: **Karen A. Mitchell** 241 22nd Street SE Naples Fl., 34117

Article VIII Indemnification

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

Article IX Bylaws

The initial Bylaws shall be adopted by the Board of Directors. The power to alter, amend or repeal the Bylaws or adopt new Bylaws is vested in the Board of Directors, subject to repeal or change by action of the shareholders.

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.

Signature/Registered Agent

Date

Signature/Incorporator

Date