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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

05 MAY 10 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FL 32399

APPROVED
AND
FILED

FLORIDA PROFIT CORPORATION OR P.A.
DENTS UNLIMITED, INC.

Certificate of Status	0
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05 MAY 10 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

DENT'S UNLIMITED, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10310 S.W. 50 STREET MIAMI, FL 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY LAWFULL ACTIVITY PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA OR THE UNITED STATES OF AMERICA

ARTICLE IV SHARES

The number of shares of stock is:

100 SHRS OF \$10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARIANO GONZALEZ, DIRECTOR AND PRESIDENT 10310 S.W. 50 STREET MIAMI, FL 33165

KENIA C. GONZALEZ, DIRECTOR AND VICE PRESIDENT 10310 S.W. 50 STREET MIAMI, FL 33165

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


MARIANO GONZALEZ 10310 S.W. 50 STREET MIAMI, FL 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIANO GONZALEZ 10310 S.W. 50 STREET MIAMI, FL 33165

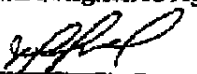
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

05/10/2005

Date



Signature/Incorporator

05/10/2005

Date