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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 : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

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TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Dentastic Dental Center Inc.

Certificate of Status	0
Certified Copy	0
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**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:

DENTASTIC DENTAL CENTER INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is

31 SE 24TH AVE, STE 3  
POMPANO BEACH, FL 33062

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock:

2 COMMON SHARES PAR VALUE \$.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT:  
PAUL R. SHEPARD  
31 SE 24TH AVE, STE 3  
POMPANO BEACH, FL 33062

VICE PRESIDENT, SECRETARY, TREASURER:  
JOLANTA MIESZCZANEK  
31 SE 24TH AVE, STE 3  
POMPANO BEACH, FL 33062

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PAGE 2 DENTASTIC DENTAL CENTER INC.

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

JOSE A. NUNEZ  
2401 W 72 ST, SUITE 2  
HIALEAH, FL 33016

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

PAUL R. SHEPARD  
31 SE 24TH AVE, STE 3  
POMPANO BEACH, FL 33062

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*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.*

  
JOSE A. NUNEZ / Registered Agent

Date

3/12/07

  
PAUL R. SHEPARD / Incorporator

Date

3/9/07

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