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FLORIDA PROFIT/NON PROFIT CORPORATION

GABLES FAMILY DENTAL, INC.

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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:

GABLES FAMILY DENTAL, INC.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

2990 SW CORAL WAY. MIAMI, FL. 33145

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

DENTAL OFFICE

ARTICLE IV SHARES
The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):

ELIAS TOBON 2990 SW CORAL WAY MIAMI, FL. 33145
P|D

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

ELIAS TOBON 2990 SW CORAL WAY MIAMI, FL. 33145

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

ELIAS TOBON 2990 SW CORAL WAY MIAMI, FL. 33145

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

(+) _____ 4/16/07
Signature/Registered Agent Date

(+) _____ 4/16/07
Signature/Incorporator Date