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PICK-UP WAIT MAIL					
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FILED 2000 May -7 PN 4:27 Secretary of State.

T. Burch MAY &

TRANSMITTAL LETTER

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

SUBJEC	Trio Dental Lab, Inc.				
Enclosed	an original and one (1) copy of the Certificate of Domestication and a check for:				
	ť .				
FEES:					
C	tificate of Domestication \$50.00				
	icles of Incorporation and Certified Copy \$78.75				
Т	al to domesticate and file \$128.75				
<u>OPTION</u>	<u>L:</u>				
C	rtificate of Status \$ 8.75				
F	OM: Louis J. Lupin, Esquire				
Name (printed or typed)					
	5070 North Highway A-1-A, Suite 200				
	Address				
	Vero Beach, Florida 32963				
	City, State & Zip				
	(772) 231-4440				
	Daytima Talanhana Number				

FILED

CERTIFICATE OF DOMESTICATION

2000 MAY -7 PM 4: 27

The undersigned,		Rodica Rusu Novak	President	SECRETARY OF STATI	
	-	(Name)		(Title)	LAHASSEE, FLORID
of		o Dental Lab, Inc.		a for	eign corporation,
in		(Corporation Name) 07.1801, Florida Statutes, does her	eby certify:		
1.	The date on which	corporation was first formed was _	July	5	, 1991 .
2.		nere the above named corporation wasNew Jersey	as first formed,	·	
3.	The name of the co	rporation immediately prior to the			
4.		rporation, as set forth in its articles 7.0401 with this certificate is	_		ed pursuant to
5.	administration of th	t constituted the seat, siege social, e corporation, or any other equival the filing of the Certificate of Don	ent jurisdiction u		licable law,
6.	Attached are Florid to s. 607.1801.	a articles of incorporation to compl	ete the domestic	ation requ	irements pursuant
I ai	m President	, of Trio Dental Lab, Inc.			
ano	d am authorized to si	gn this Certificate of Domestication	n on behalf of the	e corporat	ion and have done
so	this the <u>2</u> day o	fMay		<u></u> ,	2008 .
	4	Tolico Dusee I	Inok		
		(Authorized Signa	ture)		

Filing Fee:

\$50.00

<u>\$78.75</u>

\$128.75

Certificate of Domestication
Articles of Incorporation and Certified Copy
Total to domesticate and file

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED

2008 MAY -7 PM 4: 27

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Trio Dental Lab, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

2014 South U.S. Highway 1 Vero Beach, Florida 32962

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To engage in such activities as may be permitted by law.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

President: Rodica Rusu Novak, 2014 South U.S. Highway 1, Vero Beach, Florida 32962

Secretary: Rodica Rusu Novak, 2014 South U.S. Highway 1, Vero Beach, Florida 32962

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Rodica Rusu Novak, 2014 South U.S. Highway 1, Vero Beach, Florida 32962

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Rodica Rusu Novak, 2014 South U.S. Highway 1, Vero Beach, Florida 32962

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACC	CEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN TH	IS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND A	AGREE TO ACT IN THIS CAPACITY.
Lulica Tuba Noch.	May _2 , 2008
Signature/Registered Agent	Date

Howico take NNOK. Signature/Incorporator

May **2** , 2008

Date