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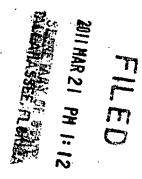
(Requestor's Name)
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COVER LETTER

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

SUBJECT: Dental Girl, Inc.					
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)	•		
Enclosed are an original and one (1) copy of the arti	icles of incorporation an	nd a check for:			
3 (7 17					
\$70.00 \$78.75	\$78.75	\$87.50			
Filing Fee Filing Fee	□Filing Fee	Filing Fee,			
& Certificate of Status	& Certified Copy	Certified Copy			
		& Certificate of Status			
	ADDITIONAL C	OPY REQUIRED			
FROM: Alex Sheehan					
Name	(Printed or typed)				
6000 150th Diago North					
6889 150th Place North Address					
•					
Palm Beach Gardens, FL 33418 City, State & Zip					
City,	State & Zip				
		MAR 21	T		
<u>561-632-5469</u>					
Daytime 1	elephone number	R E	m		
dralex1111@gmail.com		海 <u> </u>	O		
E-mail address: (to be used	d for future annual report	notification)			

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

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

ARTICLE I The name of the corp	IAME Dental Girl, Inc. oration shall be:			
ARTICLE II F	PRINCIPAL OFFICE Principal street address	Mailing address, if different is:		
	89 150th Place North Im Beach Gardens, FL 33418			
ARTICLE III P	URPOSE			
	ch the corporation is organized is: oute dental products and supplies.			
ARTICLE IV S The number of shares	BHARES s of stock is:100			
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECTOR	S		
	e:Alex Sheehan, President and Treasurer 6889 150th Place North Palm Beach Gardens, FL 33418	Name and Title:Address:		
Name and Title Address:	ELinda Donofrio, CEO and Secretary 11 Bowes Lane Reading, PA19610	Address:		
Name and Title Address:	e:			
ARTICLE VI R	REGISTERED AGENT		3 . 5 .	
	da street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	Alex Sheehan	•		
Address:	6889 150th Place North Palm Beach Gardens, FL 33418	<u>.</u>	2 2 =	
ARTICLE VII I	NCORPORATOR			
	ess of the Incorporator is:			
Name:	Alex Sheehan	•		
Address:	6889 150th Place North Palm Beach Gardens, Ft. 33418	- -	7 7	
Having been named this certificate, I am	as registered agent to accept service of process familiar with and accept the appointment as region Required Signature/Registered Agent	for the above stated corpore istered agent and agree to act Alex Sheehay	ntion at the place designated in in this capacity March 11, 2011 Date	
I submit this docum	nent and affirm that the facts stated herein are	true. I am aware that the fa	dse information submitted in a	
	Required Signature/Incorporator			