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SECRETARS OF STATE
SECRETARS F. F. LORIGI

MP 24/12

PET DENTAL DEVICE, INC. 1201 U.S. Highway One, Suite 210 North Palm Beach, Florida 33408 (561) 659-6100

February 21, 2012

COVER LETTER

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

Subject: Pet Dental Device, Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 Filing Fee

FROM: Louis F. Robinson, III

1201 U.S. Highway One, Suite 210 North Palm Beach, Florida 33408

(561) 659-6100

LFRTHREE@BELLSOUTH.NET

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: NAME

The name of the corporation shall be: Pet Dental Device, Inc.

ARTICLE II: PRINCIPAL OFFICE

Principal street address

1201 U.S. Highway One, Suite 210 North Palm Beach, Florida 33408



ARTICLE III: PURPOSE

The purpose for which the corporation is organized is: all things allowed by law for profit.

ARTICLE IV: SHARES

The number of shares of stock is: 1,000

ARTICLE V: INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Louis F. Robinson, III, President and Treasurer

Address:

1201 U.S. Highway One, Suite 210

North Palm Beach, Florida 33408

Name and Title:

Sandra L. Chaves, Vice President and Secretary

703 Sanctuary Cove Drive

West Palm Beach, Florida 33410

ARTICLE VI: REGISTERED AGENT

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

Name:

Louis F. Robinson, III

Address:

1201 U.S. Highway One, Suite 210 North Palm Beach, Florida 33408

ARTICLE VII: INCORPORATOR

FILED

The name and address of the Incorporator is:

12 FEB 23 AM 9: 56

Name:

Louis F. Robinson, III

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Address:

1201 U.S. Highway One, Suite 210

North Palm Beach, Florida 33408

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

Louis F. Robinson, III/Registered Agent

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.

Louis F. Robinson, III/Incomporator

7/21/10