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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : Vcorp Services, LLC
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DOMESTICATION
Premiere Dental Labs, Inc.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$128.75

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Corporate Filing Menu

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STATE OF FLORIDA
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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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November 6, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VCORP SERVICES, LLC

SUBJECT: PREMIERE DENTAL LABS, INC.
REF: W17000088622

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams
Regulatory Specialist II

FAX Aud. #: H17000290617
Letter Number: 917A00022407

P.O BOX 6327 - Tallahassee, Florida 32314

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CERTIFICATE OF DOMESTICATION

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The undersigned, Kevin Cook, CEO
(Name) (Title)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


of Premiere Dental Labs, Inc. a foreign corporation.
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was June 13, 2017
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Delaware
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Premiere Dental Labs, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Premiere Dental Labs, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Delaware
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am CEO, of Premiere Dental Labs, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 7th day of November, 2017


(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Premiere Dental Labs, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

2940 Mallory Cir Ste 202

Kissimmee

FL 34747

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Engage in any lawful act or activity.

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DEPT OF STATE
KISSIMMEE FLORIDA

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ARTICLE IV SHARESTHE NUMBER OF SHARES OF STOCK IS: 10,000,000**ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS**

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

Title/Name

Title/Name

D, CEO, S

Kevin Cook

3943 W Auden Cir, Missouri City, TX 77459

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

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

Vcorp Services, LLC

5011 South State Road 7, Suite 106

Davie, FL 33314 Broward County

ARTICLE VII INCORPORATORTHE NAME AND ADDRESS OF THE INCORPORATOR IS:

Kevin Cook

3943 W Auden Cir

Missouri TX 77459

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Signature/Registered Agent



Signature/Incorporator

Date

11/7/2017

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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