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Florida Department.  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
SMILE DENTAL STUDIO, INC.**

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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FEB 28 2018

K. Brumbley

FEB/27/2018/TUE 12:38 PM Bella Smile Dental

PAX No. 305-556-3486

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:Smile Dental Studio, Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10550 NW 77th Ct Suite #220  
Hialeah Gardens FL 33016**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**"P"Aniel O. Maza**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Aniel O. Maza  
10550 NW 77th Ct Suite #220  
Hialeah Gardens FL 33016**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Aniel O. MAZA  
10550 NW 77 Ct Ste 220  
Hialeah GARDENS FL 33016

2018 FEB 27 AM 11:06

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02/27/2018 14:41 3052201440  
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LAZARUS CORPORATE  
FAX No. 305-556-9486

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**Required Signatures:**

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

  
\_\_\_\_\_  
Registered Agent / Incorporator

02/26/17  
\_\_\_\_\_  
Date

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 felony as provided for in s.817.153, F.S.

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