## CAPITAL CONNECTION, INC.

417 F. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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THANK YOU
from
Your Capital Connection

# ARTICLES OF INCORPORATION 95 MAR 13 PH 3: 46

OF

# BUMBY DENTAL CLINIC, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation is BUMBY DENTAL CLINIC, INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 102 East Maple St., Winter Garden, FL 34787.

## ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is ten thousand (10,000) shares having a par value of one dollar (\$1.00) per share.

# ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Eric S. Mashburn, Esquire, 102 E. Maple Street, Winter Garden, FL 34787.

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors of the corporation is Eric S. Mashburn, 102 E. Maple St., Winter Garden, FL 34787.

The undersigned has executed these Articles of Incorporation this 13th day of March, 1995.

Capital Connection, Inc.

Barbara Neeley - President

Incorporator

CERTIFICATE OF DESIGNATION

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REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the corporation is:

BUMBY DENTAL CLINIC, INC.

2. The name and address of the Registered Agent and office is ERIC S. MASHBURN, ESQUIRE, 102 E. Maple Street, Winter Garden, FL 34787.

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 HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

ERIC S. MASHBURN, ESQUIRE

DATE: <u>3-13-95</u>

c\d.ra