P95000074103

LAW OFFICE OF

CRAIG A. JASLOW

ATTORNEY AT LAW
9351 FONTAINEBLEAU BLVD
Suite B-307
MIAMI, FLORIDA 33172
(305) 220-6346

September 18, 1995

Florida Department
of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Smile USA, Inc.

Dear Sir or Madam:

Please file the enclosed Articles of Incorporation for Smile USA, Inc.

I have enclosed a check in the amount of $70.00 for the filing. Please stamp and return the original to me.

Thank you and please do not hesitate to call if you have any questions.

Sincerely,

100001592391
-09/25/95--01037--007
*****70.00 *****70.00

Craig A. Jaslow

Craig A. Jaslow

Enc.
CAJ:lj

D. BROWN SEP 2 0 1995

ARTICLES OF INCORPORATION

OF

SMILE USA, INC.

The undersigned, desiring to form a corporation pursuant to the laws of the State of Florida, hereby makes and files with the Department of State these Articles of Incorporation.

ARTICLE I
NAME

The name of the corporation is **Smile USA, Inc.**

ARTICLE II
DURATION

The period of existence of this corporation is perpetual.

ARTICLE III
PURPOSE

The purpose for which this corporation is formed is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE IV
POWERS

This corporation shall have the power to carry out any and all of its purposes, and said powers shall include, but not be limited to, the powers granted under the laws of the State of Florida.

ARTICLE V
CAPITAL STOCK

The total authorized capital stock of this corporation is one thousand (1000) shares of common stock with a par value of one dollar ($1.00).

ARTICLE VI
PRINCIPAL OFFICE

The location of the corporation's principal office is 76 Miracle Mile, Coral Gables, Florida 33134.

ARTICLE VII
INITIAL REGISTERED AGENT

The address and name of the corporation's initial registered agent upon whom process against this corporation may be served is: Craig A. Jaslow, Esq., 9351 Fontainebleau Blvd., Suite B-307, Miami, Florida 33172.

ARTICLE VIII
INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of two directors, who shall not be required to be shareholders. The name and address of the persons serving as director are:

Thomas Carless	76 Miracle Mile Coral Gables, Florida 33134
Carolina Victoria Tozzi	76 Miracle Mile Coral Gables, Florida 33134

ARTICLE IX
INCORPORATOR

The name and address of the Incorporator is: Craig A. Jaslow, Esq., 9351 Fontainebleau Blvd., Suite B-307, Miami, Florida 33172.

ARTICLE X
BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the Board of Directors and the shareholders.

ARTICLE XI
TAX YEAR

The tax year for the corporation shall be from September 1 to August 31.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 21st day of September, 1995.

Craig A. Jaslow, Esq.
Incorporator

Smile USA, Inc.

WITNESSETH

That **Smile USA, Inc.** has named Craig A. Jaslow, Esq., whose address is 9351 Fontainebleau Blvd., Suite B-307, Miami, Florida 33172, as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-named corporation, at the place designated in this certificate, I hereby agree to serve as the registered agent for the corporation, and agree to comply with the applicable provisions of Florida law.

Dated this 21st day of September, 1995.

Craig A. Jaslow, Registered Agent

SECOND NOTICE. CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $3,5..)

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 NOV 14 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95DCC 14162

SMILE USA, Inc.

Mailing Address: P.O. Box 331295, MIAMI FL 33233-1295

Scouting

REINSTATEMENT 96

2 Principal Place of Business	2a Mailing Address
21 ~~Scouting Process~~	26 P.O. Box 331295
22 Ste 409 1901 Brickell	27
23 MIAMI FL	28 MIAMI FL
24 33129 / 25 USA	29 33233 / 30 Dade USA

3. Date Incorporated or Qualified
3a. Date of Last Report
4. FEI Number: 65-0655587 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes. Yes ☐ No ☒

9. Name and Address of Current Registered Agent

CRAIG JASLOW Esq.
9351 Fontainbleu Blvd.
Suite B-307
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ (NOTE: Registered Agent signature required when reinstating) DATE

12 OFFICERS AND DIRECTORS

TITLE	president	☐ DELETE
NAME	THOMAS CARLESS	
STREET ADDRESS	1901 Brickell 409	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	Vice president	☐ DELETE
NAME	CAROLINA V. TOZZI	
STREET ADDRESS	1901 Brickell Ave 409	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	600002008806--2	
1.4 CITY-ST-ZIP	-11/19/96--01162--018 ****375.00 ****375.00	
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP	96 11-14-96	

CR2E034 (3/96)

14 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ______ 9/2/96 305 859 8058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #