

P96000026256

TRANSMITTAL LETTER

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

11000001172111111  
03/20/95-01074-0003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: MEDI - DENT CORPORATION  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: Dr Donald O. Astwood Jr.  
Name (printed or typed)

13415 S.W. 113th Court.  
Address

Miami, Florida, 33176.  
City, State & Zip

(305) 234-2425  
Daytime Telephone number

FILED  
96 MAR 20 AM 8:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AL MAR 25 1995

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

FILED

96 MAR 20 AM 8:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

MEDI-DENT CORPORATION

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13415 S.W. 113th, Court,  
Miami, Florida, 33176.

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Ten (10) Shares.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dr Donald O. Astwood Jr.  
13415 S.W. 113th Court,  
Miami, Florida, 33176.

**ARTICLE V INCORPORATOR(S)**

**See Instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Dr Donald O Astwood Jr.  
13415 S.W. 113th Court,  
Miami, Florida, 33176

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

18th day of March, 19 96.

(An additional article must be added if an effective date is requested.)

Dr Donald O Astwood Jr.  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: MEDI-DENT CORPORATION

2. The name and address of the registered agent and office is:

Dr Donald O. Antwood Jr.  
(NAME)

13415 S.W. 113th Court,  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, Florida, 33176,  
(CITY/STATE/ZIP)

*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. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Don O. Antwood Jr.*  
(SIGNATURE)

March 18th, 1996  
(DATE)

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Medi-Dent Corporation

21477 S.W. 88th Place  
Windy Point, Lakes By The Bay  
Florida, 33189  
Tel. (305)254-5922 Fax. (305)254-5922

March 21st, 1997

Florida Department of State,  
Division of Corporations.  
Tallahassee, Florida.

Re; Medi-Dent Corporation  
Document Number P96000026256

I wish to Register a Corporate Mailing Address change, and to  
request an Annual Report Form.

*D. O. Astwood Jr.*  
Dr D.O. Astwood Jr. M.D.

*AK  
sent  
3-24*