

OFFICE USE ONLY (Document #)

LEZARUS CORPORATE FILING SERVICE, INC.

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

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***122.50 ***122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. UNITED DENTAL CARE INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
98 FEB -3 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 JAN 30 PM 12:00
DIVISION OF CORPORATION

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

January 30, 1998

LAZARUS

MIAMI, FL

SUBJECT: UNITED DENTAL CARE, INC.
Ref. Number: W98000002195

We have received your document for UNITED DENTAL CARE, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 698A00005473

**ARTICLES OF INCORPORATION
OF
UNITED DENTAL ENTERPRISES CORP.**

We, the undersigned, hereby associate ourselves together under the Laws of the State of Florida, under the provisions of the Statutes of the State of Florida, providing for the formation, liability, rights, privileges and immunities for a Corporation for profit, generally and hereby make, subscribe, acknowledge and file this Certificate for the purpose of becoming a Corporation under the Laws of the State of Florida

**ARTICLE ONE
Name of the Corporation**

The name of this Corporation shall be:

UNITED DENTAL ENTERPRISES CORP.

**ARTICLE TWO
NATURE OF BUSINESS**

The general nature of the business to be transacted by this Corporation shall be:

Any activity and business permitted under the Laws of the State of Florida, including but not limited to Dental Care Services.

**ARTICLE THREE
Capital Stock**

The maximum number of shares of capital stock authorized to be issued by this Corporation shall be 500 shares, each having a par value of \$1.00 per share of said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of stockholders. All or any part of said capital stock may be paid for in cash, in property, or in labor or services at a fair valuation to be fixed by the incorporator, or by the Board of Directors, at a meeting called for such purpose. All stock when issued shall be fully paid for and shall be non-assessable.

**ARTICLE FOUR
Initial Capital**

The amount of capital with which this Corporation shall begin business shall be: **Five Hundred Dollars (\$500.00)**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE FIVE
Term of Existence

This Corporation shall be perpetual existence.

ARTICLE SIX
Principal Office

The following shall be the street address and the principal office for this Corporation, but the Corporation shall have the power to move the principal office to any other address in the State of Florida, and to establish branch offices and other places of business at such other places within or without the State of Florida that may be deemed expedient:

2900 West 12 Ave. # 27
Hialeah, Fl. 33013

ARTICLE SEVEN
Directors

There shall be a Board of Directors for this Corporation which consist of **TWO** persons. the number of Directors may be increased or diminished from time to time as determined by the By-Laws, but shall never be less than **ONE**. Each of said Directors shall be of full age and all of them shall be residents of the United States. Any Director may be removed at any annual or special meeting of stockholders called in accordance with the By-Laws of the Corporation, by the same vote as that required to elect a Director.

ARTICLE EIGHT
Initial Board of Directors

The names and addresses for the first Board of Directors is as follows:

NAME	ADDRESS	OFFICE
RICARDO MONTERO	2900 W. 12 AVE. # 27 HIALEAH, FL. 33013	PRESIDENT
JOSE E. MONTERO	2900 W. 12 AVE. # 27 HIALEAH, FL. 33013	V/PRESIDENT

SUBSCRIBERS

The name and addresses of each subscriber to these Articles of Incorporation and the number of stocks each agrees to purchase are:

NAME	ADDRESSES	NO. OF SHARES
RICARDO MONTERO	2900 W. 12 AVE. # 27 HIALEAH, FL. 33013	250
JOSE E. MONTERO	2900 W. 12 AVE. # 27 HIALEAH, FL. 33013	250

The private property of the stockholders shall not be subject to the payment of the Corporation's debt to any extent whatsoever.

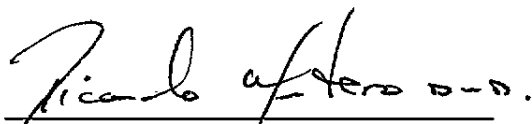
ARTICLE TEN Conflict of Interest

No contract or other transaction between this Corporation and any other Corporation, and no act of this Corporation shall in any way be affected or invalidated by the fact that any of the officers of this Corporation are pecuniarily or otherwise interested in, or are Directors or officers of, such other Corporation; any Director individually, or any firm of which any Director may be a member, may be a party too, or may be pecuniarily or otherwise interested in any contract or transaction of this Corporation, provided that the fact that he or such firm is so interested shall be disclosed or shall have been known to the Board of directors or a majority thereof, and any Director of this Corporation or who is so interested may be counted in determining the existence of a quorum at any such meeting of the Board of directors of this Corporation, with like force and effect as if he were not such a Director or officer of such other Corporation or not so interested.

ARTICLE ELEVEN Amendment

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the Laws of the State of Florida, and all rights conferred upon the stockholders herein are subject to this reservation.

IN WITNESS WHEREOF, WE, the undersigned, have executed these Articles of Incorporation for the uses and purpose stated therein this 27 day of January, 1998



RICARDO MONTERO
PRESIDENT



JOSE E. MONTERO
V. PRESIDENT

CERTIFICATE OF DESIGNATION
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:

UNITED DENTAL ENTERPRISES CORP.

2.- THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

JOSE E. MONTERO
2900 W. 12 AVE. # 27
HIALEAH, FL. 33013

SIGNATURE

TITLE

DATE

Jose E. Montero
President
1-28-98

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.

SIGNATURE

DATE

[Signature]
1-28-98

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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