

P98000022262

S.D.S. Handpiece Repair, Inc.
Sheila Scott
127 Yacht Club Way, #208
Hypoluxo, Florida 33462
(561)533-6528

March 6, 1998

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

RE: S.D.S. handpiece Repair, Inc.

900002450689--2
-03/09/98--01080--017
*****70.00 *****70.00

Dear Sir or Madam:

Enclosed herewith please find the Articles of Incorporation for the above referenced Corporation.

I am also enclosing a check in the amount of \$70.00, which represents the filing fee of \$35.00 and the Registered Agent designation fee of \$35.00.

Thank You.

Sincerely Yours,

Sheila Scott

Sheila Scott

S.D.S. Handpiece Repair, Inc.

FILED
98 MAR -9 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK MAR 10 1998

**ARTICLES OF INCORPORATION
OF
SDS Handpiece Repair Inc.**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 MAR -9 AM 11:04

FILED

ARTICLE I The name of the corporation shall be:

S.D.S. Handpiece Repair, Inc.

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

127 Yacht Club Way, #208 Hypoluxo, Fl 33462

ARTICLE III The number of shares of stock that this corporation is

1,000 (One Thousand) shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

ARTICLE IV The name and Florida street address of the initial registered agent are:

Sheila Scott, 127 Yacht Club Way, #208 Hypoluxo, Fl 33462

ARTICLE V The name and address of the incorporator to these Articles of Incorporation are

Sheila Scott 127 Yacht Club Way, #208 Hypoluxo, Fl 33462
Louis Scott 127 Yacht Club Way, #208 Hypoluxo, Fl 33462

Sheila Scott

Incorporator

3-6-98

Date

Louis Scott

Incorporator

3/6/98

Date

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.

Sheila Scott

Registered Agent

3-6-98

Date