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FROM: BERMAN WOLFE & RENNERT, P.A.

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076103002011

CONTACT: CHRISTINA DE HOWARTZ

PHONE: (305)577-4166

FAX #:

(305) 373-6036

NAME: PAIGE ORTHODONTICS, P.A.

AUDIT NUMBER..... H98000008311

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

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FLORIDA DEPARTMENT OF STATE
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Secretary of State

May 4, 1998

BERMAN WOLFE & RENNERT, P.A.

SUBJECT: PAIGE ORTHODONTICS, P.A.

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ARTICLES OF INCORPORATION OF PAIGE ORTHODONTICS, P.A.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a professional corporation under the laws of Florida, hereby adopts the following Articles of Incorporation:

ARTICLE I

NAME

The name of the professional corporation is: Paige Orthodontics, P.A.

ARTICLE II

PRINCIPAL OFFICE

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

Paige Orthodontics, P.A. 1500 S.E. 17th Street, Bldg, 100 Ocala, Florida 34471-4669

ARTICLE III

DIRECTORS

The number of directors constituting the initial board of directors is one (1), and the name and address of the person who is to serve as director until the first annual meeting of the shareholders or until his successors are elected and qualified is:

Stephen Paige, D.D.S. 1500 S.E. 17th Street, Bldg. 100 Ocala, Florida 34471-4669

ARTICLE IV

SHARES

The number of shares of stock which this professional corporation is authorized to have outstanding at any one time is One Thousand (1,000) shares of common stock each having \$.001, par value.

This document prepared by: Sheila T. Lynch, Esq. #064106 Berman Wolfe & Rennert, P.A. 100 S.E. Second Street, 35th Floor Miami, FL 33131-2130 Telephone: (305) 577-4177 (((H98000008311 6)))

ARTICLE V

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

Stephen Paige, D.D.S. 1500 S.E. 17th Street, Bldg. 100 Ocala, Florida 34471-4669

ARTICLE VI

INCORPORATOR

The name and street address of the incorporator of this professional corporation is:

Sheila T. Lynch, Esq.
Berman Wolfe & Rennert, P.A.
35th Floor, NationsBank Tower
100 Southeast Second Street
Miami, Florida 33131-2130

ARTICLE VII

NATURE OF BUSINESS

This professional corporation is organized for the sole and specific purpose of rendering professional services related to the practice of orthodontics.

IN WITNESS WHEREOF, the Incorporator has executed these Articles on April 30,1998.

BERMAN WOLFE & RENNERT, P.A.

Sheila T. Lynch, Incorporator

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CERTIFICATE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated professional corporation at the place designated in this cardificate, 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.

BERMAN WOLFE & RENNERT, P.A

Dated: April 30, 1998

STATE OF FLORIDA

COUNTY OF MARION

M44 The foregoing instrument was acknowledged before me on April ... who is personally known to me.

My Commission Expires:

JENNIFER E. TAYLOR

GACINION/HOPsign Artists of Incorp.