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CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: BRIGHT SMILES, P.A.

AUDIT NUMBER..... H98000009450

DOC TYPEFLORIDA PROFIT CORPORATION OR F.A. CERT. OF STATUS. 0 PAGES. 5

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May 20, 1998

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SUBJECT: BRIGHT SMILES, P.A.

REF: W98000011471

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ARTICLES OF INCORPORATION OF BRIGHT SMILES, P.A.

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The Subscriber to these Articles of Incorporation is a natural person over the age of 18 years, duly licensed by the State of Florida to conduct professional services pursuant to Section 491, of the Florida Statutes, who present these Articles for the formation of a professional corporation under the Professional Service Corporation and Limited Liability Company Act, Chapter 621 of the Florida Statutes and other applicable laws of the State of Florida:

ARTICLES I: NAME OF THE PROFESSIONAL CORPORATION

The name of the Professional Corporation is BRIGHT SMILES, P.A., hereinafter referred to as the "Professional Corporation".

ARTICLE II: PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the principal office and mailing address of the Professional Corporation is 3932 NW 167th Street, Miami, FL, 33054.

ARTICLE III: DURATION OF THE PROFESSIONAL CORPORATION

The period of duration of the Professional Corporation shall be perpetual unless dissolved according to law.

ARTICLE IV: PURPOSE OF THE PROFESSIONAL CORPORATION

The purpose for which the Professional Corporation is organized to provide professional dental services to individuals and groups pursuant to Chapter 466 of the Florida Statutes, through individuals authorized by the Florida Department of Business and Professional Regulations to render such services as individuals.

JEANNELLE G. ANDREWS ESQ TOOLS FOR CHANGE 6255 N. W. 7TH AVENUE MIAMI, FL. 33150 FL BAR# 0076124

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ARTICLE V: AUTHORIZED SHARES



The Professional Corporation is authorized to issue Five Thousand (5,000) shares of common stock with a par value of \$1.00 per share. All stock shall be of one class. The Board of Directors may authorize the issuance of such stock to such person(s) upon such terms and for such consideration as they may deem appropriate; however, none of the shares of the Professional Corporation may be issued to anyone other than an individual licensed to practice dentistry in the State of Florida.

ARTICLE VI: PREEMPTIVE RIGHTS

The Professional Corporation elects to have preemptive rights. Every shareholder, upon the sale for cash of any new or reissued stock of the Professional Corporation, shall have the right to purchase their pro-rata share thereof at the price at which it is offered to others.

ARTICLE VII: INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the Professional Corporation's initial registered office is 3932 NW 167th STREET, MIAMI, FLORIDA, 33054, and the registered agent at that office is DR. ELSA CORTORREAL.

ARTICLE VIII: INITIAL BOARD OF DIRECTORS

The Professional Corporation shall have one (1) director constituting the initial Board of Directors. The number of directors may be increased or decreased from time to time by the bylaws.

The initial Board of Director of the Professional Corporation shall be comprised of:

ELSA CORTORREAL, D.D.S. 3932 NW 167th Street Miami, Florida 33054

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ARTICLE IX: SUBSCRIBER

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The name and residence address of the person signing the Articles of Incorporation as a subscriber and who is duly licensed to practice professional services in the State of Florida is as follows:

DR. ELSA CORTORREAL 3932 NW 167th Street Miami, FL 33054

in witness whe	reof, I, dr. elsa cortorreal	, the undersigned incorporator,
have signed these Articles o	f Incorporation on this day of	-may, 1998 and
acknowledged the same to b	e my act. Dr. Clse Contonia DR. ELSA CORTORREAL	
STATE OF FLORIDA COUNTY OF DADE)	
The foregoing instru	ment was sworn to before me this	day of, 1998
by, DR. ELSA CORTORRE	AL who personally appeared before m	e at the time of notarization, and
who is personally known to	me or who produced a Florida Driver:	s License as identification.
	NOTARY PU	BLIC:
	SIGN:	
	PRINT:	TE OF FLORIDA AT LARGE

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to the provisions of Chapters 48.091 and 607.0501 of the Florida Statutes, the following is submitted, in compliance with said Acts:

First--That BRIGHT SMILES, P.A., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at City of Miami, County of Dade, State of Florida, has named DR. ELSA CORTORREAL, at 3932 NW 167th STREET, in the City of MIAMI, County of DADE, State of Florida, as its agent to accept service of process within this state.

-Acceptance of Agent-

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for the above stated Professional 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.

BY: Dr. BLSA CORTORREAL

DATE: 19 May 98

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