

P98000076728

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

300002628683--8
-08/31/98-01076-012
****122.50 ****122.50

Dear Division of Corporations:

Enclosed please find Articles of Incorporation for Martisa A. Widomz for
along with a check in the amount of \$~~122.50~~
for filing fee and designation of registered agent. 122.50

Also enclosed is a photocopy of the Articles. Please return this to
me with the filing date stamped on it.

Thank you,

Fritz Grant

Fritz Grant
2741 Cypress Ave
Miramar FL 33185

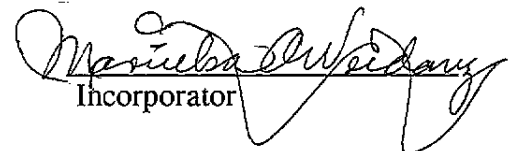
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 AUG 31 AM 10:14

ARTICLES of INCORPORATION
Professional Association

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 AUG 31 AM 10:14

1. The name of the corporation is: Marielsa A. Weidanz, P.A.
2. The purpose for which this corporation is organized is to practice Dentistry.
3. The principal place of business and mailing address of the corporation is:
Marielsa A. Weidanz, P.A.
820 S.W. 141st Ave
Miami, Florida 33184-3063
4. The corporation shall have the authority to issue 100,000 shares of common stock, in one class only, each with a par value of \$.01.
5. The registered agent of the corporation is Marielsa A. Weidanz, P.A. and the registered address is 820 S.W. 141st Ave., Miami, Florida, 33184-3063.
6. The initial Board of Directors shall have 1 members whose names and address is as follows:
Marielsa A. Weidanz, P.A., 820 S.W. 141st Ave., Miami, Florida, 33184-3063.
The number of directors can be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.
7. The incorporator of this corporation is Marielsa A. Weidanz whose address is 820 S.W. 141st Ave., Miami, Florida, 33184-3063.

Date 8-18-1998


Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Date 8-18-1998


Registered Agent