

TRANSMITTAL LETTER

P98000093005

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

SUBJECT: DENTAL ASSISTING ACADEMY OF PALM BEACH, INC.
(Proposed corporate name - must include suffix)

300002678213--3
-11/02/98--01118--009
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Florian Braich
Name (Printed or typed)

4239 Northlake Blvd. Suite B
Address

Palm Beach Gardens, Florida 33410
City, State & Zip

407-723-2330
Daytime Telephone number

98 NOV -2 AM 9:24

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

NOTE: Please provide the original and one copy of the articles.

R. Purinton NOV - 3 1998

**ARTICLES OF INCORPORATION
OF
DENTAL ASSISTING ACADEMY OF PALM BEACH, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the Corporation is Dental Assisting Academy of Palm Beach, Inc.

ARTICLE II. PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation is:

4239 Northlake Blvd. Suite B
Palm Beach Gardens, Florida 33410

ARTICLE III. SHARES

The Corporation is authorized to issue 2,500 shares of common stock of one class without nominal or par value.

ARTICLE IV. INITIAL REGISTERED AGENT AND STREET ADDRESS

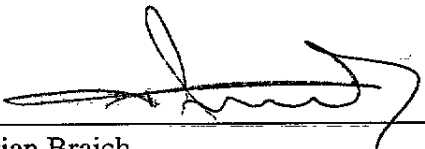
The name and Florida address of the Corporation's initial agent for service of process are:

Florian Braich
4239 Northlake Blvd. Suite B
Palm Beach Gardens, Florida 33410

ARTICLE V. INCORPORATOR

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

Florian Braich
5880 Old Dixie Highway
Melbourne, Florida 32940



Florian Braich

Date

10/27/98

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV -2 AM 9:24

ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

Having been named as registered agent and to accept service of process for the above state 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:


Florian Braich

Date

10/27/98

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV -2 AM 9:24