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LAZARUS CORPORATE FILING SERVICE, INC.
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MIAMI, FLORIDA (305) 552-5973
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

400002737834--4
-01/12/99--01039--025
*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. J. L. AUTO DENT-1ST, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

99 JAN 12 PM 1:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

RECEIVED
99 JAN 12 AM 11:00
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

The undersigned, incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of incorporation.

ARTICLE I NAME

The name of corporation shall be: J.L. AUTO DENT- IST, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
13038 SW 88 LANE
MIAMI, FL 33186

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at of one time is: 100 (ONE HUNDRED) PAR VALUE \$ 1 (ONE DOLLAR)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

Name and address the the initial registered agent is:

JAVIER LARRAURI
13038 SW 88 LANE
MAIMI, FL 33186

V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporator is (are):

JAVIER LARRAURI
13038 SW 88 LANE
MAIMI, FL 33186

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TALLAHASSEE FLORIDA

ARTICLE VI DIRECTOR(S)

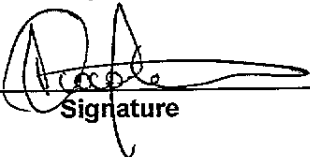
The name(s) and street address(es) of the directors(s) to these Articles of Incorporator is are:

JAVIER LARRAURI
13038 SW 88 LANE
MAIMI, FL 33186

ANNA C CORRADO
138038 SW 88 LANE
MIAMI, FL 33186

The undersigned incorporator(s) has (have) executed these Articles of incorporation
this _____ day of _____ 19_____

Signature

x 
Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: J. L. AUTO DENT-IST, INC

2. The name and address of the registered agent and office is:

JAUIER LORRAUDI

(NAME)

13038 SW 88 LANE

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33186

(CITY/STATE/ZIP)

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.

SIGNATURE X Javier Lorrudi

DATE 1/7/99

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TALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00