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TRANSMITTAL LETTER

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

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-07/12/93--01108--001
*****78.75 *****78.75

SUBJECT: DENTAL MAX USA, INC.
(Proposed corporate name - must include suffix)

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: Michael PARKOFF
Name (Printed or typed)

3100 South Ocean Blvd
Address

PALE BEACH FL 33480
City, State & Zip

561-688-0202
Daytime Telephone number

Michael Parkoff GAVE
AUTHORIZATION BY PHONE TO
CORRECT address
DATE 7-20-99
DOC. EXAM CB

FILED
99 JUL 12 PM 2:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

CB
7-20-99
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ARTICLES OF INCORPORATION

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 shall be:

DENTAL MAX USA, INC.

ARTICLE II PRINCIPAL OFFICE

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

813 NORTH MILITARY TRAIL
WEST PALM BEACH FLORIDA 33415

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MICHAEL PARKOFF
3100 SOUTH OCEAN BLVD Suite 404 North

ARTICLE V INCORPORATOR

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

Seth SHAPIRO 813 North Military Trail, West Palm Beach, FL 33415
DARI SHAPIRO 813 North Military Trail, West Palm Beach, FL 33415

Pari Shapiro

Signature/Incorporator

7/7/99

Date

(An additional article must be added if an effective date is requested.)

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]
Signature/Registered Agent

7/7/99

Date