

P99000065224

Articles of Incorporation

FILED
99 JUL 15 PM 6:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

SUBJECT:

Ruble Dental Lab, Inc.

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

\$ 70

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-07/15/99--01070--016
*****70.00 *****70.00

FROM:

Name Ruble Dental Lab, Inc.

Address: 1 Doctor Lane

City, State & Zip: Lake Wales, Florida 33853

Telephone: 941-676-8536

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

D. BROWN JUL 22 1999

ARTICLES OF INCORPORATION OF

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation.:

ARTICLE I - NAME

Name of Corporation: Ruble Dental Lab, Inc.

ARTICLE II - REGISTERED OFFICE AND AGENT

Name and Address of Resident Agent: Thomas Ruble
1 Doctor Lane
Lake Wales, Florida 33853

Street Address of Principal Office : 1 Doctor Lane
Lake Wales, Florida 33853

ARTICLE III - AUTHORIZED SHARES

Number of shares: 10,000

If there is more than one class of shares, shares with rights and preferences, list such information on "Exhibit A."

ARTICLE IV - INCORPORATORS

The name(s) and Addresses) of the incorporator(s) of the corporation:

NAME	NUMBER AND STREET	CITY	STATE	ZIP CODE
Thomas Ruble	1 Doctor Lane	Lake Wales	Fl	33853

In Witness Whereof, the undersigned being all the incorporators of said corporation execute these Articles of Incorporation and verify, subject to penalties of perjury, that the statements contained herein are true, this 1 day of July 1999

Signature 

Printed Name Thomas Ruble

Signature

Printed Name

Signature

Printed Name

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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: Ruble Dental Lab, Inc.

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

(Name) Thomas Ruble

(P.O. Box NOT Acceptable) 1 Doctor Lane

(City/State/Zip) Lake Wales, Florida 33853

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: 

DATE: July 1, 1999

REGISTERED AGENT FILING FEE: \$35.00

Division of Corporations, PO Box 6327, Tallahassee, FL 32314

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