

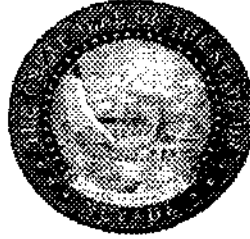
□□

**ROSS MILLER**  
*Secretary of State*

**STATE OF NEVADA**

**SCOTT W. ANDERSON**  
*Deputy Secretary  
for Commercial Recordings*

**NICOLE J. LAMBOLEY**  
*Chief Deputy Secretary of State*



**MATTHEW M. GRIFFIN**  
*Deputy Secretary for Elections*

**CHRIS LEE**  
*Deputy Secretary  
for Southern Nevada*

**OFFICE OF THE  
SECRETARY OF STATE**

**KATE THOMAS**  
*Deputy Secretary for Operations*

**Fax Transmission**

To: MITCHELL C WRIGHT ESQ  
From:  
Subject: Secretary of State Documents - Do Not Reply - Nevada Filing Correspondence  
for Job C20100616-0115

**Message:**

**NEVADA STATE CAPITOL**  
101 N. Carson Street, SUITE 3  
Carson City, Nevada 89701  
Telephone: (775) 684-5708  
Fax: (775) 684-5725

**COMMERCIAL RECORDINGS  
MEYER'S ANNEX OFFICE**  
202 N. Carson Street  
Carson City, Nevada 89701-4201  
Telephone: (775) 684-5708  
Fax: (775) 684-5725

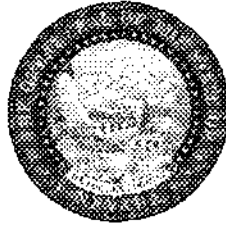
**LAS VEGAS OFFICE**  
555 E. Washington Avenue  
Las Vegas, Nevada 89101  
**SECURITIES: SUITE 5200**  
Telephone: (702) 486-2440  
Fax: (702) 486-2452  
**CORPORATIONS: SUITE 4000**  
Telephone: (702) 486-2880  
Fax: (702) 486-2888

**SECURITIES SATELLITE OFFICE**  
1755 E. Plumb Lane, SUITE 231  
Reno, Nevada 89502-3691  
Telephone: (775) 688-1855  
Fax: (775) 688-1858

STATE OF NEVADA

**ROSS MILLER**  
Secretary of State

**SCOTT W. ANDERSON**  
Deputy Secretary  
for Commercial Recordings



OFFICE OF THE  
SECRETARY OF STATE

**Commercial Recordings Division**  
202 N. Carson Street  
Carson City, NV 89701-4069  
Telephone (775) 684-5708  
Fax (775) 684-7138

MITCHELL C WRIGHT ESQ  
325 W LIBERTY STREET  
RENO, NV 89501-2011

**Job: C20100616-0115**  
June 24, 2010

**Special Handling Instructions:**  
FAXED TO FILER  
6-24-10 - GJJ

**Charges**

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Articles of Incorporation	20100432543-44	6/11/2010 6:51:50 AM	1	\$50.00	\$50.00
Total					\$50.00

**Payments**

Type	Description	Amount
Check	Check #2104	\$50.00
Total		\$50.00

**Credit Balance: \$0.00**

**Job Contents:**

File Stamped Copy(s): 1  
Corp Charter(s): 1  
ILO-ALO Nonprofit(s): 1

MITCHELL C WRIGHT ESQ  
325 W LIBERTY STREET  
RENO, NV 89501-2011

U4U6U1

\*040601\*



**ROSS MILLER**  
 Secretary of State  
 204 North Carson Street, Suite 4  
 Carson City, Nevada 89701-4520  
 (775) 684 5708  
 Website: www.nvsos.gov

**Nonprofit**  
**Articles of Incorporation**  
 (PURSUANT TO NRS CHAPTER 82)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20100432543-44</b> Filing Date and Time <b>06/11/2010 6:51 AM</b> Entity Number <b>E0303352010-3</b>
------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	FUTURE SMILES		
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input type="checkbox"/> Commercial Registered Agent: Name <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Mitchell C. Wright, Esq. Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity 325 W. Liberty Street Reno Nevada 89501-2011 Street Address City State Zip Code Mailing Address (if different from street address) City State Zip Code		
<b>3. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than four directors/trustees)	1) Christine Garvey, RDH Name 6601 Cowboy Trail N. Las Vegas NV 89131-2915 Street Address City State Zip Code 2) Stephanie Redwine, RDH Name 7116 Overhill Ave. Las Vegas NV 89129 Street Address City State Zip Code 3) Mary Teresa Chandler, RDH Name 4501 Desert Bloom Court Las Vegas NV 89129 Street Address City State Zip Code 4) Marilyn Kirkpatrick Name 4747 Showdown Drive N. Las Vegas NV 89031 Street Address City State Zip Code		
<b>4. Purpose:</b> (required; continue on additional page if necessary)	The purpose of the corporation shall be: Charitable and educational purposes, and any lawful activity in furtherance of its purposes		
<b>5. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	Mitchell C. Wright, Esq. Name Incorporator Signature 325 W. Liberty Street Reno NV 89501-2011 Address City State Zip Code		
<b>6. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity.  Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date June 9th, 2010		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 82 Articles Revised: 4-14-09

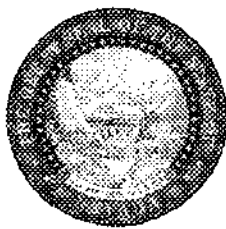


## SECRETARY OF STATE



## CORPORATE CHARTER

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **FUTURE SMILES**, did on June 11, 2010, file in this office the original Articles of Incorporation; that said Articles of Incorporation are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 24, 2010.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER  
Secretary of State

Certified By: GJ Jallet  
Certificate Number: C20100616-0115  
You may verify this certificate  
online at <http://www.nvsos.gov/>



**ROSS MILLER**  
Secretary of State  
202 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684 5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)

**Instructions for Initial List,  
Registered Agent and State  
Business License Application**

**ATTENTION:** You may now file your initial or annual list online at [www.nvsos.gov](http://www.nvsos.gov)

**IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM.**

**ATTENTION – Effective October 1, 2009,** filing and payment of the State Business License will be processed by the Secretary of State’s office. Entities that are required to file an initial or annual list of officers with the Secretary of State are now required to file for the State Business License at the time their list is due as part of the annual list filing, unless specifically exempt. The State Business License fee is \$200. Those holding a current State Business License may receive a proration credit for the unexpired portion of their current State Business License.

TYPE or PRINT the following information on the Initial List and Registered Agent Form:

1. The **NAME** and **FILE NUMBER** of the entity **EXACTLY** as it is registered with this office.
2. The **FILING PERIOD** is the month and year of filing **TO** the month and year 12 months from that date. Example: if the entity date was 1/12/99 the filing period would be 1/1999 to 1/2000.
3. The name and address of the **REGISTERED AGENT** and **OTHER** names and addresses as required on The list should be entered in the boxes provided on the form. Limited-Liability Companies **MUST** indicate whether **MANAGER** or **MANAGING MEMBER** is being listed.
4. If qualified for the statutory exemption from the State Business License, enter the applicable code in the area provided. If you have a current State Business License, enter the expiration date in the area provided for proper proration of business license fees.
5. The **SIGNATURE**, including his/her title and date signed **MUST** be included in the areas provided at the bottom of the form.
6. Completed **FORM, FEES and applicable PENALTIES** must be returned to the Secretary of State. Pursuant to NRS 225.085, all Initial and Annual Lists must be in the care, custody and control of the Secretary of State by the close of the business on the due date. Lists received after the due date will be returned unfiled, and will require any associated fees and penalties as a result of being late. Trackable delivery methods such as Express Mail, Federal Express, UPS Overnight may be acceptable if the package was guaranteed to be delivered on or before the due date yet failed to be timely delivered.

*The filing fee for an initial list is \$125.00, in addition to the State Business License. Nonprofit corporations and corporations sole are not required to maintain a State Business License or pay the additional fee. Nonprofit corporation initial lists are \$25.00.*

**ADDITIONAL FORMS** may be obtained on our website at [www.nvsos.gov](http://www.nvsos.gov) or by calling 775-684-5708.

**FILE STAMPED COPIES:** To receive one file stamped copy, please mark the appropriate check box on the list. Additional copies require \$2.00 per page and appropriate order instructions.

**CERTIFIED COPIES:** To order a certified copy, enclose an additional \$30.00 and appropriate instructions. A copy fee of \$2.00 per page is required for each copy generated when ordering 2 or more certified copies.

**EXPEDITE FEE:** Filing may be expedited for an additional \$75.00 fee.

Filing may be submitted at the office of the Secretary of State or by mail at the following addresses:

**MAIN OFFICE:**  
*Regular and Expedited Filings*

Secretary of State  
Status Division  
202 North Carson Street  
Carson City NV 89701-4201  
Phone: 775-684-5708  
Fax: 775-684-7123

**SATELLITE OFFICES:**  
*Expedited Filings Only*

Secretary of State – Las Vegas  
Commercial Recordings Division  
555 East Washington Ave, Suite 5200  
Las Vegas NV 89101  
Phone: 702-486-2880  
Fax: 702-486-2888

**(NONPROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT OF**  
**FUTURE SMILES**

FILE NUMBER

NAME OF CORPORATION  
 FOR THE FILING PERIOD OF **JUN, 2010** TO **JUN, 2011. Due by Jul 31, 2010**



E0303352010-3

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:



100201

**MITCHELL C WRIGHT ESQ**  
**325 W LIBERTY STREET**  
**RENO NV 89501-2011**

A FORM TO CHANGE REGISTERED AGENT INFORMATION CAN BE FOUND ON OUR WEBSITE:  
[www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**\*\*YOU MAY NOW FILE YOUR LIST ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the \$25.00 filing fee filing fee. A \$50.00 penalty must be added for failure to file this form by the deadline.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business.
5. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
6. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
7. Form must be in the possession of the Secretary of State on or before the last day of the first month following the incorporation/initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE: \$25.00 LATE PENALTY: \$50.00

NAME	TITLE(S)		
	PRESIDENT (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
NAME	TITLE(S)		
	SECRETARY (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
NAME	TITLE(S)		
	TREASURER (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
NAME	TITLE(S)		
	DIRECTOR		
ADDRESS	CITY	STATE	ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**Signature of Officer**

**(NONPROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT OF  
FUTURE SMILES**

FILE NUMBER

NAME OF CORPORATION  
FOR THE FILING PERIOD OF **JUN, 2010** TO **JUN, 2011. Due by Jul 31, 2010**




E0303352010-3

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

**MITCHELL C WRIGHT ESQ**  
325 W LIBERTY STREET  
RENO NV 89501-2011

A FORM TO CHANGE REGISTERED AGENT INFORMATION CAN BE FOUND ON OUR WEBSITE:  
[www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of   
Document Number **20100520650-11**  
Filing Date and Time **07/07/2010 8:11 AM**  
Entity Number **E0303352010-3**  
Secretary of State  
State of Nevada

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**\*\*YOU MAY NOW FILE YOUR LIST ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***


**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the \$25.00 filing fee filing fee. A \$50.00 penalty must be added for failure to file this form by the deadline.
- Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the first month following the incorporation/initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE: \$25.00 LATE PENALTY: \$50.00

NAME Christine Garvey, RDH	TITLE(S) PRESIDENT (OR EQUIVALENT OF)
ADDRESS 6601 Cowboy Trail	CITY STATE ZIP CODE Las Vegas NV 89131-2915
NAME Mary Teresa Chandler, RDH	TITLE(S) SECRETARY (OR EQUIVALENT OF)
ADDRESS 4501 Desert Bloom Court	CITY STATE ZIP CODE Las Vegas NV 89129
NAME Stephanie Redwine, RDH	TITLE(S) TREASURER (OR EQUIVALENT OF)
ADDRESS 7116 Overhill Avenue	CITY STATE ZIP CODE Las Vegas NV 89129
NAME Marilyn Kirkpatrick	TITLE(S) DIRECTOR
ADDRESS 4747 Showdown Drive	CITY STATE ZIP CODE N. Las Vegas NV 89031

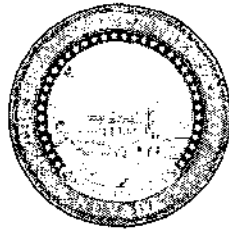
I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 306.790 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**  Title **TREASURER** Date **6/29/10**  
Signature of Officer Nevada Secretary of State Initial List Nonprofit  
Revised: 7-1-08



STATE OF NEVADA

**ROSS MILLER**  
Secretary of State



**Commercial Recordings Division**  
202 N. Carson Street  
Carson City, NV 89701-4069  
Telephone (775) 684-5708  
Fax (775) 684-7138

**SCOTT W. ANDERSON**  
Deputy Secretary  
for Commercial Recordings

OFFICE OF THE  
SECRETARY OF STATE

MITCHELL C WRIGHT ESQ  
325 W LIBERTY STREET  
RENO, NV 89501-2011

**Job: C20100715-0501**  
July 20, 2010

**Special Handling Instructions:**  
I.O. MO 07.20.10SH

**Charges**

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Initial List	20100520650-11	7/7/2010 8:11:33 AM	1	\$25.00	\$25.00
Total					\$25.00

**Payments**

Type	Description	Amount
Check	Check #571	\$25.00
Total		\$25.00

**Credit Balance: \$0.00**

**Job Contents:**  
File Stamped Copy(s):

1

MITCHELL C WRIGHT ESQ  
325 W LIBERTY STREET  
RENO, NV 89501-2011

