Filing and License Fee: \$310.00 mlnimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

CORPORATIONS DIV

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1.	The	name of t	the corporation is	Correctional	Dental Associa	ntes, A Professional Corporation				
2.	II is	incorpora	ited under the la	ws of New Jer	rsey					
3.		The name, if different, which it elects to use in Rhode Island is:								
	(a)	"incorpor	ame of the carp ated", or "limited apporate endings	i" or an abbrev	riation thereof, ti	ncorporation does not contain the word "corporation", "company", hen list the name of the corporation with the addition of one of the				
	(b)	If the con qualify a application	nd transact busi	ot available in I ness in Rhode	Rhode Island, the Island as state	en set forth below the fictitious name under which the corporation will d In the "Fictitious Business Name Statement" to be filed with this				
4.	The	date of its	s incorporation is	July 14, 1995	3	and the period of its duration is Perpetual				
5.										
-	The address of its principal office is 192 West State Street, Trenton, New Jersey 08608 The address of its proposed registered office in Rhode Island is 222 Jefferson Boulevard, Suite 200 (Street Address, not P.O. Box)									
6.	I 71 0	The address of its proposed registered office in Knode Island is								
	Warwick, RI 02888 and the name of its proposed registered agent in Rhode Island at									
	(City/Town) (Zip Code)									
	that	address i	s Parasearch, I	nc.		arne of Agent)				
					•	•				
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:									
	lmn	nate Dent	al Service, Rho	de Island Depa	artment of Corre	ections				
8.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).									
			!	<u>Vame</u>		<u>Address</u>				
	Dire	ector	Leslie A. Hayiir	g, Jr., D.D.S.		192 West State Street, Trenton, New Jersey 08608				
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		ing issued by the proper unicer of the state	e or want y under the
13. This Application for Certificate	of Authority shall be effective upo	n filing unless a specified date is provided wi	hich shall be no later
than the 90th day after the da	e of this filing		
		r penalty of perjury, I declare and affirm tha cation for Certificate of Authority, includir	
		nments, and that all statements contained	t herein are true and
	corre		
September 9, 2014		111 A/H. TIM	
Date:	- (Signature of Authorizet Officer of the Cor	poration
		V	

Type or Print Name of Authorized Officer

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

CORRECTIONAL DENTAL ASSOCIATES, A PROFESSIONAL CORPORATION

0100633123

With the Previous or Alternate Name

CORRECTIONS DENTAL ASSOCIATES, INC. (Previous Name)
CORRECTIONAL DENTAL ASSOCIATES, INC. (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Professional Corporation was registered by this office on July 14, 1995.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Karen A. Confoy, Esquire 997 Lenox Drive Building 3 Lawrenceville, NJ 08648

I further certify that the incorporator is:

Cis 172 W State St Trenton. NJ 08608

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on: July 8, 2014.

President

Leslie Hayling, Jr, Dds 192 West State St Trenton, NJ 08608

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

CORRECTIONAL DENTAL ASSOCIATES, A PROFESSIONAL CORPORATION

0100633123



Certification# 133471029

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 9th day of September, 2014

Andrew P Sidamon-Eristoff
Acting State Treasurer

SECRETARY OF STATE CORPORATIONS DIV



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

