

STATE OF MINNESOTA
SECRETARY OF STATE

ARTICLES OF INCORPORATION
Business and Nonprofit Corporations

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK.

Please read the directions on the reverse side before completing this form. All information on this form is public information.

The undersigned incorporator(s) is an (are) individual(s) 18 years of age or older and adopt the following articles of incorporation to form a (mark ONLY one):

[] FOR-PROFIT BUSINESS CORPORATION (Chapter 302A) [X] NONPROFIT CORPORATION (Chapter 317A)

ARTICLE I NAME

The name of the corporation is:

Mississippi Headwaters Area Dental Health Center

(Business Corporation names must include a corporate designation such as Incorporated, Corporation, Company, Limited or an abbreviation of one of those words.)

ARTICLE II REGISTERED OFFICE ADDRESS AND AGENT

The registered office address of the corporation is:

c/o Beltrami County Public Health, 616 America Avenue, Suite 340 Bemidji MN 56601

(A complete street address or rural route and rural route box number is required; the address cannot be a P.O. Box) City State Zip

The registered agent at the above address is:

Name (Note: You are not required to have a registered agent.)

ARTICLE III SHARES

The corporation is authorized to issue a total of 0 shares.

(If you are a business corporation you must authorize at least one share. Nonprofit corporations are not required to have shares.)

ARTICLE IV INCORPORATORS

I (We), the undersigned incorporator(s) certify that I am (we are) authorized to sign these articles and that the information in these articles is true and correct. I (We) also understand that if any of this information is intentionally or knowingly misstated that criminal penalties will apply as if I (we) had signed these articles under oath. (Provide the name and address of each incorporator. Each incorporator must sign below. List the incorporators on an additional sheet if you have more than two incorporators.)

Mary Marchel 616 America Ave., Suite 340 Bemidji MN 56601
Name Street City State Zip

Mary Marchel Signature

Warren Larson 1233 34th NW Bemidji MN 56601
Name Street City State Zip

Warren Larson Signature

Print name and phone number of person to be contacted if there is a question about the filing of these articles.

Mary Marchel
Name


(218) 333-8119
Phone Number

STATE OF MINNESOTA
SECRETARY OF STATE
ARTICLES OF INCORPORATION
Business and Nonprofit Corporations

Mississippi Headwaters Area Dental Health Center

Additional Incorporator

John Lueth, D.D.S. 1311 Bemidji Avenue Bemidji, Mn 56601


Signature