

State of Idaho

Office of the Secretary of State

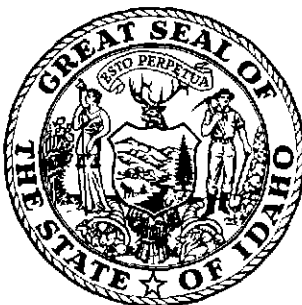
**CERTIFICATE OF REGISTRATION
OF
CONVERGENT DENTAL, INC.**

File Number C 206678

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 27, 2015



Lawrence Denney
SECRETARY OF STATE

By _____

John L. Loring



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00.

Complete and submit the form in duplicate.

2015 JUL 27 AM 9:34

1. The name of the entity is: Convergent Dental, Inc.

SECRETARY OF STATE
STATE OF IDAHO

2. The name which it shall use in Idaho is: _____

(Enter a name here only if you are required to adopt an alternate name)

3. Select the type of entity you wish to register:

☒ Business Corporation

☐ General Partnership

☐ Nonprofit Corporation

☐ General Cooperative Association

☐ Limited Liability Partnership

☐ Limited Partnership (Including a limited liability limited partnership)

☐ Limited Liability Company

☐ Statutory Trust, Business Trust, or Common-law Business Trust

☐ Other: _____

(Provide unlisted foreign entity type here)

4. Jurisdiction of formation: Delaware

(Provide the domestic jurisdiction where the entity was formed)

5. The address of its principal office is:

2 Vision Dr.

Natick

MA

01760

(Street Address)

(City)

(State)

(Zipcode)

(Mailing Address, if different)

(City)

(State)

(Zipcode)

6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)

(City)

(State)

(Zipcode)

(Mailing Address, if different)

(City)

(State)

(Zipcode)

7. The address to which correspondence should be addressed, if different from item 5, is:

(Address)

(City)

(State)

(Zipcode)

8. Name and street address of registered agent in Idaho:

C T Corporation System

921 S Orchard St Suite G

Boise

ID 83705

(Name)

(Address)

(City)

(State)

(Zipcode)

9. The name, capacity, and mailing address of at least one governor:

Michael Cataldo

2 Vision Dr

Natick

MA 01760

(Name and Capacity)

(Address)

(City)

(State)

(Zipcode)

Mark Collins

2 Vision Dr.

Natick

MA 01760

(Name and Capacity)

(Address)

(City)

(State)

(Zipcode)

Nathan Monty

2 Vision Dr.

Natick

MA 01760

(Name and Capacity)

(Address)

(City)

(State)

(Zipcode)

Typed Name: Mark Collins

Signature: Mark Collins

Capacity: CFO

Secretary of State use only

IDAHO SECRETARY OF STATE

07/27/2015 05:00

CK:101380 CT:312792 BH:1485436
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C 206678

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONVERGENT DENTAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

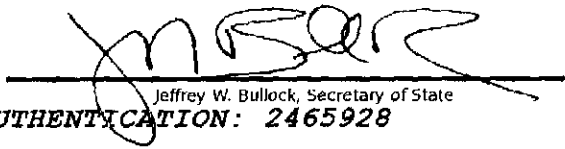
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



4947218 8300

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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2465928

DATE: 06-15-15