CERTIFICATE OF EXISTENCE

I				hereby	
ce	ertify that Dr./S	Sh	Son/Daug	hter o	
			personally appeared	before	
m	me on and has signed in my presence.				
His/Her specimen signature is attested below. I am fully satisfied about his/her identity.					
Si	Signature of the Dentist/DM/DH Registration No				
Αd	ddress				
•••					
	Latest Photograph Duly attested by the certifying authority and his Rubber Seal		Signature of the certifying Autho With full name, address & design Rubber Seal	ation	
			Dutcui iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		