

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L04000065188
FILED 8:00 AM
September 01, 2004
Sec. Of State
Irrivers

Article I

The name of the Limited Liability Company is:

DENTAL CENTER FOR SNORING AND SLEEP BREATHING, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:

4512 NORTH FLAGLER DRIVE
SUITE 301
WEST PALM BEACH, FL. 33407

The mailing address of the Limited Liability Company is:

4512 NORTH FLAGLER DRIVE
SUITE 301
WEST PALM BEACH, FL. 33407

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

DOUGLAS PHILLIPS
4512 NORTH FLAGLER DRIVE
SUITE 301
WEST PALM BEACH, FL. 33407

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DOUGLAS PHILLIPS

Article V

The name and address of managing members/managers are:

Title: MGRM
DOUGLAS PHILLIPS
4512 NORTH FLAGLER DRIVE, SUITE 301
WEST PALM BEACH, FL. 33407

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Article VI

The effective date for this Limited Liability Company shall be:

09/01/2004

Signature of member or an authorized representative of a member

Signature: DOUGLAS PHILLIPS