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FLORIDA/FOREIGN LIMITED LIABILITY CO.  
MOUNICA FALEMBAN, D.D.S., PLLC

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## Articles of Organization of

### MOUNICA FALEMBAN, D.D.S., PLLC

The undersigned natural person(s), of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

**I. Name of Limited Liability Company**

The name of this professional limited liability company is: MOUNICA FALEMBAN, D.D.S., PLLC

**II. Registered Office and Registered Agent**

The initial registered office of this limited liability company and the name of its initial registered agent at this address are:

MAX A. ADAMS, ESQ  
THE MEDI-LAW FIRM  
1400 NW 10<sup>TH</sup> AVE  
PENTHOUSE III  
MIAMI, FL 33136

**III. Statement of Purposes**

The purposes for which this limited liability company is organized are:

To engage in the lawful practice of Orthodontic services to the general public under the laws of the State of Florida.

**IV. Management and Names and Addresses of Initial Manager**

This will be a member-managed company. The name and address of each managing member are as follows:

Title: MGRM  
Name: Mounica Falemban  
Address: 12571 Equestrian Cir Apt 901  
Fort Myers, FL 33907

**V. Principal Place of Business of the Limited Liability Company**

The principal place of business of the limited liability company shall be:

12571 Equestrian Cir Apt 901  
Fort Myers, Florida 33907

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**VI. Period of Duration of the Limited Liability Company**

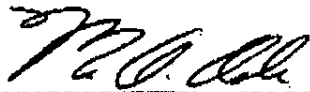
The period of duration of the limited liability company shall be:

“Perpetual”

**VII. Company Existence**

The Company's existence shall begin effective as of February 9, 2010.

The authorized members executed these Articles of Organization on 2/9/2010.



Max A. Adams, Esq., as Attorney in Fact

2/9/10

Date

**STATEMENT OF REGISTERED AGENT**

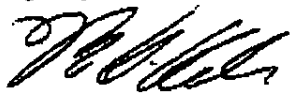
**LIMITED LIABILITY COMPANY:**

MOUNICA FALEMBAN, D.D.S., PLLC

**REGISTERED AGENT/OFFICE:**

Max A. Adams, Esq.  
The Medi-Law Firm  
1400 NW 10<sup>TH</sup> Avenue  
Penthouse III  
Miami, FL 33136

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



Max A. Adams, Esq., as Registered Agent

Date: 2/9/2010

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