

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

L16000154745
FILED 8:00 AM
August 18, 2016
Sec. Of State
tlhenderson

Article I

The name of the Limited Liability Company is:

DENTAL ASSOCIATES OF PLANT CITY PRACTICE MANAGEMENT,
LLC

Article II

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

6240 LAKE OSPREY DRIVE
SARASOTA, FL. 34240

The mailing address of the Limited Liability Company is:

6240 LAKE OSPREY DRIVE
SARASOTA, FL. 34240

Article III

Other provisions, if any:

THE BUSINESS AND AFFAIRS OF THE LIMITED LIABILITY COMPANY
SHALL BE MANAGED BY ONE OR MORE MANAGERS ELECTED AS
PROVIDED IN THE OPERATING AGREEMENT OF THE LIMITED
LIABILITY COMPANY.

Article IV

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

DAVID P NICHOLS
6240 LAKE OSPREY DRIVE
SARASOTA, FL. FL

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: DAVID P. NICHOLS

Signature of member or an authorized representative

Electronic Signature: DAVID P. NICHOLS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.