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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LINITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	(Name of foreign limited liability company)
_	(Name of foreign limited liability company)
2.	DELAWARE urisdiction under the law of which foreign limited liability (FEI number, if applicable)
(Ji	urisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	(Date of Organization) 5. 30 Years (Duration: Year limited liability company will cease to
-	(Date of Organization) 5.
6.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7	1269/ MCGREGOR BLVD #101
	FORT MYCRS, FL, 33919 (Street address of principal office)
_	(Street address of principal office)
8. I	f limited liability company is a manager-managed company, check here
9. 1	The name and usual business addresses of the managing members or managers are as follows:
	LARRY HALL + C. ANNETTE HALL
•	12691 Mª GREGOR BLVD. +101
,	FORT MYERS, PL 33919
	PORT MIYERS, FR 00111
•	
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11.	Nature of business or purposes to be conducted or promoted in Florida: DENTISTRY
_	20 01 11
	X Larry Hall
	Signature of a metaber or an authorized representative of a member.
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)
	LARRY HALL
	Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
GENTLE DENTAL OF LEE COUNTY, LIC	
2. The name and the Florida street address of the registered agent and office are:	Nision of Nision of 03 OCT 3
C. ANNETTE HALL	- CENT
(Name)	2 유디
1269 Me GREEOR BLVD, #10 Florida street address (P.O. Box NOT ACCEPTABLE)	3: 06
FORT MYERS, FL 33919 (City/State/Zip)	

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 as provided for in Chapter 608, F.S.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENTLE DENTAL OF LEE COUNTY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENTLE DENTAL OF LEE COUNTY LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindson

AUTHENTICATION: 2711378

DATE: 10-27-03

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