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BYTALL ANASSEE, ELORIDA

Y SCOTT Jun 12 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

CONTACT PERSON: Lydia Cohen -- EXT# 62974

ACCOUNT NO. : I2000000195 /8040417 REFERENCE AUTHORIZATION \$ 125.00 COST LIMIT : ORDER DATE: June 11, 2019 ORDER TIME: 3:15 PM ORDER NO. : 804041-005 CUSTOMER NO: 7461873 FOREIGN FILINGS NAME: BOYNTON BEACH MANAGEMENT SERVICES, LLC ✓ __ QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

EXAMINER:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Boynton Beach Manag (Name of Foreign	ement Services, LLC Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate n	ume adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limated Lie	ability Company," "L L.C," or "LLC."}
2. State of Delaware (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI nur	iber, if applicable)
4. 6/11/2019	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.)	
5. 6240 Lake Osprey Dri			
(Street Address of I Sarasota, FL 34240	Principal Office)	6. 6240 Lake Osprey Drive (Mailing Add Sarasota, FL, 34240	tress)
Attn: General Counsel		Attn: General Counsel	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Corporation Service Compan	у	
Office Address:	1201 Hays Street		
	Taltahassee	, Florida <u>32301</u>	
and accept the obligations	of my position as egistered agent. (Registered agent's a	Lydia Coh Asst. Vice Pre	
8. The name, title or capa <u>Title or Capacity:</u>	city and address of the person(s) who ha Name and Address:		Name and Address:
Member	Dental Care Alliance, L.L.C. 6240 Lake Osprey Drive	Time of Capacity.	5: 5
	Sarasota, FL 3420	-	<u> </u>
(Use attachments if necess	ary)		
). Attached is a certificate our is diction under the law of the translator must be suffither than the suffither translator must be suffither translator.	of existence, no more than 90 days old, of which it is organized. (If the certificate bmitted)	duly authenticated by the official ha	ving custody of records in the ion of the certificate under oath
	ated in accordance with section 605.0203 the Department of State constitutes a thir		
	: 13	<u> </u>	
	Signature o	of an authorized person	
	Eric Preston, attorney-in-fact		
·-	Typed or r	rinted name of signee	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BOYNTON BEACH MANAGEMENT SERVICES,

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 ELEVENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOYNTON BEACH MANAGEMENT SERVICES, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203002648

Date: 06-11-19

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