Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) 400003356164---4 -08/15/00--01017--003 ****125.00 ****125.00 (Corporation Name) (Document #) Pick up time Walk in Certified Copy Mail out ☐ Will wait Photocopy ☐ Certificate of Status NEW FILINGS **AMENDMENTS** ☐ Profit ☐ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Availabili -Other Merger Document ExaminOTHER FILINGS REGISTRATION/QUALIFICATION Correct Att Correct (1) ☐ Foreign Emolina applicate to Fictitious Name Limited Partnership Verifyer Reinstatement DCC Trademark Acknowledgement Other DCC W. P. Verifyer

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Examiner's Initials

Name

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 21, 2000

BEN SMITH 1730 DAWN ST. SARASOTA, FL 34231

SUBJECT: DENTCOR INTERNATIONAL L.L.C.

Ref. Number: W00000020537

We have received your document for DENTCOR INTERNATIONAL L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

If the street address and the mailing address is the same you can add to Article II Principal and Mailing address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Letter Number: 300A00044767

Diane Cushing Corporate Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
DENTCOR INTERNATIONAL Z.L.C.
ARTICLE II - Address: PRINCE AND
ARTICLE II - Address: PRINCIPLE AND WAILING ADDRESS:
1730 DAWN St.
SARASOTA, FC 34231
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
BEN Smith
120 ADAMS RO
AUBURN DALE, FC 33823
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 accept the obligations of my position as registered agent as provided for in Chapter 608, Family 1997.
Registered Agent's Signature
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

FILING FEES:

Typed or printed name of signee

\$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)

that the facts stated herein are true.)