

LOI 000014967

LAW OFFICES OF
JACK A. DONENFELD
A LEGAL PROFESSIONAL ASSOCIATION

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⁵ ADMITTED ONLY IN FL. & PA.

August 27, 2001

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****125.00 ****125.00

Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399
VIA Federal Express

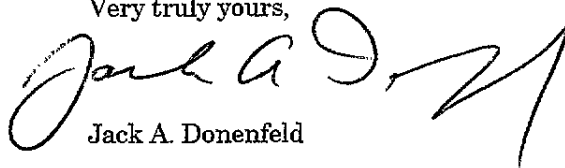
Re: Formation of Orthodontic Options P.L.

Ladies and Gentlemen:

I have enclosed for filing, on behalf of the above-captioned company Articles of Organization, and a Certificate of Designation of Registered Agent/Registered Office. I have also enclosed a check for filing fees in the total amount of \$125.00.

Please acknowledge this filing to me upon registration of the limited liability company. Thank you for your cooperation.

Very truly yours,


Jack A. Donenfeld

FILED
01 AUG 28 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAD/nkc

Enclosure

cc: Charles A. Frank, D.M.D., M.S.

FL Registration Div of Corp.doc

LOI-14967
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ARTICLES OF ORGANIZATION

OF

ORTHODONTIC OPTIONS P.L.

The undersigned members adopt the following Articles of Organization pursuant to Chapters 608 and 621 of the Florida Statutes, of the Florida Limited Liability Company Act and the Professional Service Corporation and Limited Liability Company Act, respectively.

ARTICLE I NAME OF COMPANY

The name of the limited liability company is **ORTHODONTIC OPTIONS P.L.** (the "Company").

ARTICLE II PRINCIPAL OFFICE

The mailing address and street address of the Company's principal office is as follows:

3457 Hendricks Avenue
Jacksonville, Florida 32207.

ARTICLE III REGISTERED AGENT AND REGISTERED OFFICE

The name and Florida street address of the Company's registered agent and registered office are as follows:

Dmd
Charles A. Frank, *D.D.S.* *ca*
3457 Hendricks Avenue
Jacksonville, Florida 32207

ARTICLE IV PERIOD OF DURATION

The Company shall exist for a perpetual period, unless sooner terminated by operation of law or pursuant to the provisions of the Company's operating agreement (the "Operating Agreement").

ARTICLE V MANAGEMENT

The Company will be managed by its member(s) in accordance with the Operating Agreement that is executed and adopted by all of the members.

ARTICLE VI PURPOSE

The Company is organized for the sole and specific purpose of rendering professional dentistry services.

FILED
01 AUG 28 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

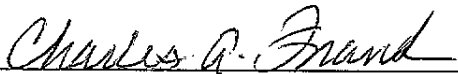
**ARTICLE VII
OPERATING AGREEMENT**

The Operating Agreement among the members of the Company must be writing.

**ARTICLE VIII
AFFIRMATION**

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the following member(s) and/or his (their) authorized representative(s) have executed these Articles of Organization on this 23 day of August, 2001.



CHARLES A. FRANK, ~~D.D.S.~~
DMD cag.

FILED
01 AUG 28 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE
OF
ORTHODONTIC OPTIONS P.L.

Pursuant to the provisions of section 608.415 or 608.507, Florida Statutes, the limited liability company named below submits the following statement (a) designating the registered office and registered agent in the State of Florida, and (b) providing for the registered agent's acceptance of his appointment to such position and the acceptance of his obligations as registered agent.

1. The name of the limited liability company is: **ORTHODONTIC OPTIONS P.L.**
2. The name and address of the registered agent and office is:

DMD cof.
Charles A. Frank, D.D.S.
3457 Hendricks Avenue
Jacksonville, Florida 32207

3. In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.

Charles A. Frank

CHARLES A. FRANK, D.D.S., as registered agent
for and a member of Orthodontic Options P.L.
DMD cof.

August 23, 2001

FILING FEE: \$25 for Designation of Registered Agent

FILED
01 AUG 28 PM 5: 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA