

L01000015362
CoastDental
Our Smiles Are Everywhere.

August 20, 2001

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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-08/28/01--01023--002
****375.00 ****125.00

Re: Articles of Organization – Coast Sarasota Crossings, PL

To whom it may concern:

Enclosed please find Articles of Organization for a domestic Professional Limited Liability Company, Coast Sarasota Crossings, PL, and Designation of Resident Agent submitted for filing with your office. Also please find a check in the amount of \$125.00 representing the filing fee.

Should you have any questions or require further information please do not hesitate to contact me.

Very truly yours,



Thomas R. Roth, D.D.S., J.D., LL.M.
Corporate Attorney for Coast Dental Services, Inc.

Enclosure
Check

FILED
01 SEP - 7 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L01-15362
Q



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 29, 2001

THOMAS ROTH
2502 NORTH ROCKY POINT DRIVE, SUITE 1000
TAMPA, FL 33607

SUBJECT: COAST SARASOTA CROSSINGS, PL
Ref. Number: W01000020092

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for COAST SARASOTA CROSSINGS, PL and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 501A00049116

**ARTICLES OF ORGANIZATION FOR
COAST SARASOTA CROSSINGS, P.L.**

**ARTICLE I
Name**

The name of the professional limited liability company is:

COAST SARASOTA CROSSINGS, P.L.

**ARTICLE II
Address**

The mailing address and street address of the principal office of the professional limited liability company is 5425 Fruitville Road, Suite 16, Sarasota, Florida 34232.

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TALLAHASSEE, FLORIDA

**ARTICLE III
Duration**

The period of duration for the professional limited liability company is perpetual.

**ARTICLE IV
Management and Nature of Business**

The professional limited liability company is to be managed by the members and the name and address of the managing members is Coast Dental Services, P.A., 2501 Rocky Point Drive, Suite 1000, Tampa, Florida 33607. Its nature of business is the practice of dentistry.

**ARTICLE V
Admission of Additional Members and Qualifications of Members**

No person may be admitted as a member unless each member consents in writing to the admission of the additional member. None of the membership units of the professional limited liability company may be issued to anyone other than an individual who is duly licensed to practice dentistry in the State of Florida.

ARTICLE VI
Registered Agent and Registered Address

The name and the street address of the registered agent are:

Thomas R. Roth
2502 Rocky Point Drive
Suite 1000
Tampa, Florida 33607

ARTICLE VII
Indemnification

The professional limited liability company shall, to the full extent permitted by Section 608.4363 of the Florida Statutes, as amended from time to time, indemnify all persons whom it may indemnify pursuant thereto. The indemnification provided by this Article VII shall not limit or exclude any rights, indemnities or limitations of liabilities to which any person may be entitled, whether as a matter of law, under the regulations of the professional limited liability company, by agreement or otherwise.

BY THE MEMBER:

COAST DENTALSERVICES, P.A.

By: _____

Adam Diasti, President

(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.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.57, FLORIDA STATUTES, THE UNDERSIGNED PROFESSIONAL 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 professional limited liability company is COAST SARASOTA CROSSINGS, P.L
2. The name and the Florida street address of the registered agent are:

Thomas R. Roth

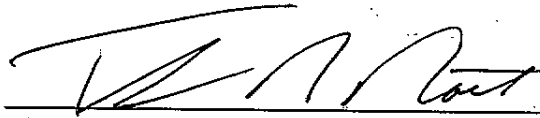
2502 Rocky Point Drive, Suite 1000
Tampa, Florida 33607

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Having been named as registered agent and to accept service of process for the above stated professional 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.



Thomas R. Roth, Registered Agent