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AL

**LIMITED LIABILITY COMPANY**

**Oral and Maxillofacial Surgery Associates, PLLC**

Certificate of Status	0
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DIVISION OF CORPORATION

**ARTICLES OF ORGANIZATION  
OF  
ORAL AND MAXILLOFACIAL SURGERY ASSOCIATES , PLLC**

The undersigned, pursuant to the provisions of Chapter 621 of the Florida Statutes, for the purpose of forming a professional limited liability company under the laws of the State of Florida, do set forth the following:

**ARTICLE I - NAME**

The name of this limited liability company is ORAL AND MAXILLOFACIAL SURGERY ASSOCIATES , PLLC (the "Company").

**ARTICLE II - PERIOD OF DURATION**

The period of duration of the Company shall be from the date of filing these Articles with the Department of State until the first to occur of the following:

- (i) Thirty (30) years from the date of filing of these Articles of Organization with the Department of State, or
- (ii) Dissolution of the Company pursuant to provisions of the Florida Limited Liability Company Act.

**ARTICLE III - PURPOSE AND POWERS**

This limited liability company is organized for the purpose of conducting an oral and maxillofacial surgery center, together with all actions incident thereto. This limited liability company shall have, but is not limited to, all powers enumerated in Chapter 621 mentioned above.

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**ARTICLE IV - ADDRESS OF INITIAL PRINCIPAL OFFICE OF COMPANY**

The mailing address and street address of the initial principal office in Florida for the Company is 7 Clifford Drive, Shalimar, FL 32579.

**ARTICLE V - INITIAL REGISTERED AGENT**

The name and street address of the initial registered agent in Florida for the Company  
H. Bart Fleet, 1201 Eglin Parkway, Shalimar, Florida 32579.

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**ARTICLE VI - ADDITIONAL MEMBERS**

An interest of a Member of the Company may be transferred or assigned to such extent and in the manner provided in the Operating Agreement and in accordance with Chapter 621 of the Florida Statutes. However, if all of the remaining Members of the Company do not approve of such proposed transfer or assignment by unanimous written consent, the transferee or assignee of the interest of such Member shall have no right to participate in the management of the business and affairs of the Company or to become a Member and in such case the transferee or assignee shall be entitled to receive only the share of profits or other compensation by way of income and the return of contributions to which the transferee Member would otherwise be entitled.

**ARTICLE VII- CONTINUITY OF BUSINESS**

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Company, the business of the Company shall not be continued and the Company shall be dissolved unless there is obtained within thirty (30) days thereafter the consent of all the remaining Members of the Company to a continuation thereof.

**ARTICLE VIII- MANAGEMENT**

The Company is to be managed by one or more manager or managers, and is thus a manager managed limited liability company. The names of the initial managers who are to serve until the first Annual Meeting of Members or until their successors are duly elected and qualified are

Charles W. Elwell, Jr.

Robert C. Ogletree, Jr.

**ARTICLE IX - INDIVIDUALS FORMING COMPANY**

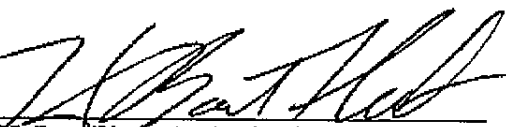
The names and addresses of the Members forming this Company are as follows:

Charles W. Elwell, Jr.

Robert C. Ogletree, Jr.

and their authorized representative for purposes of executing these Articles of Organization is H. Bart Fleet.

IN WITNESS WHEREOF, the undersigned has executed these Articles on the 18<sup>th</sup> day of February, 2002, as the authorized representative for the Members of the Company identified above.

By:   
H. Bart Fleet, Authorized Representative

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**ACCEPTANCE BY THE REGISTERED AGENT**

I, H. Bart Fleet, hereby accept appointment as Registered Agent for the Professional Limited Liability Company, ORAL AND MAXILLOFACIAL SURGERY ASSOCIATES, P L L C, and do hereby understand and accept the obligation of the position, and acknowledge my acceptance with my signature below on this 18<sup>th</sup> day of February, 2002.

  
H. Bart Fleet, Registered Agent

THIS INSTRUMENT PREPARED BY:

H. Bart Fleet  
1201 Eglin Parkway  
Shalimar, FL 32579

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