February 18, 2002

DOLE11-0067/

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

To whom it may concern:

Enclosed is my application for the Articles of Organization for a Florida Limited Liability Company.

The following information is requested according to the instruction given:

Name:

Fernando E. Pacheco

Mailing address

1335 Seagrape Circle Weston, FL 33326

(954) 270-5151

Business address

1850 Nob Hill Road Plantation, FL 33322

If you have any questions, please do not hesitate to call me.

Thank you in advance for your assistance.

Sincerely,

Fernando E. Pacheco



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 25, 2002

FERNANDO E. PACHECO 1335 SEAGRAPE CIRCLE WESTON, FL 33326

SUBJECT: DENTAL SPECTRUM LABORATORY, LLC

Ref. Number: W02000005340

We have received your document for DENTAL SPECTRUM LABORATORY, LLC 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 registered agent must sign accepting the designation.

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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 302A00011520

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DENTAL SPECTRUM LABORATORY, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

1850 NOB HILL ROAD PLANTATION, FL 33322

ARTICLE III - Registered Agent

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

FERNANDO E. PACHECO 1335 SEAGRAPE CIRCLE WESTON, FL 33326

ARTICLE IV - Management:

Signature of Registered Agent

(Check the appropriate box)

☐ The Limited Liability Company is to be a manager-managed company.

The Limited Liability Company is to be managed by the members.

Signature of a member or an authorized representative of a member

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

FERNANDO E.

Typed or printed name of signee

Filing Fee: \$100.00 for Articles