

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000032388

FILED
Oct 09, 2007
Secretary of State

Entity Name: IMPLANT DENTISTRY OF VENICE, LLC

Current Principal Place of Business:

1515 SOUTH TAMIAMI TRAIL, STE. 3
VENICE, FL 34292

New Principal Place of Business:

1515 SOUTH TAMIAMI TRAIL, STE. 3
VENICE, FL 34285

Current Mailing Address:

1515 SOUTH TAMIAMI TRAIL, STE. 3
VENICE, FL 34292

New Mailing Address:

1515 SOUTH TAMIAMI TRAIL, STE. 3
VENICE, FL 34285

FEI Number: 57-1141668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEGLER, SARI LYNN
1521 SOUTH TAMIAMI TRAIL, STE. 304
VENICE, FL 34292 US

Name and Address of New Registered Agent:

REEGLER, SARI LYNN
1521 SOUTH TAMIAMI TRAIL, STE. 304
VENICE, FL 34285 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SARILYNN REEGLER

10/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: CHAMPION, DAVID M
Address: 1515 S. TAMIAMI TRAIL #3
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: CHAMPION, DAVID M
Address: 1515 S. TAMIAMI TRAIL #3
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID M. CHAMPION

PRES

10/09/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date