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LIMITED LIABILITY COMPANY

SIDNEY C. ROSENTHAL, D.M.D., M.S.D., PLLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION OF

SIDNEY C. ROSENTHAL, D.M.D., M.S.D., PLLC

The undersigned, Sidney C. Rosenthal, D.M.D., M.S.D., a natural person licensed to practice dentistry in Florida and sole member of this professional limited liability company, hereby presents these Articles of Organization for the formation of a professional limited liability company under the provisions of Chapter 621, Florida Statutes.

ARTICLE I

The name of the limited liability company is:

SIDNEY C. ROSENTHAL, D.M.D., M.S.D., PLLC

ARTICLE II - PRINCIPAL OFFICE ADDRESS

The address of the principal office of the professional limited liability company is 4300 Bayou Boulevard, Suite 11. Pensacola, Florida 32503.

ARTICLE III - PURPOSES AND POWERS

This professional limited liability company is organized for the purpose of providing professional dentistry services, for any legal and lawful purpose for which a professional limited liability company may be organized and may exercise all powers and rights which a professional limited liability company may exercise under the Professional Service Corporation and Limited Liability Company Act.

ARTICLE IV - TERM OF EXISTENCE

The professional limited liability company shall have a perpetual existence.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The address of the initial registered office of this professional limited liability company shall

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be 4300 Bayou Boulevard, Suite 11, Pensacola, Florida 32503, and the name of the initial registered agent of this limited liability company at that address is Sidney C. Rosenthal, D.M.D., M.S.D.

ARTICLE VI - MANAGEMENT

This professional limited liability company shall be managed by its sole member. The name and address of the member are:

Sidney C. Rosenthal, D.M.D., M.S.D. 4300 Bayou Boulevard, Suite 11 Pensacola, Florida 32503.

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization on the date set forth below.

MEMBER:

SIDNEY C. ROSENTHAL, D.M.D., M.S.D.

Date: ______, 2003

REGISTERED AGENT ACCEPTANCE

I do hereby accept the foregoing designation as registered agent of SIDNE C. ROSENTHAL, D.M.D., M.S.D., PLLC. Further, I am familiar with and accept the duties and

obligations of such designation.

SIDNEY C. ROSENTHAL, D.M.D., M.S.D.

Date: $\frac{5}{7}$, 2003