

L03000017658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300018565713

05/15/03--01007--005 **155.00

FILED
2003 MAY 14 AM 8:29
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAY 16 2003

LAW OFFICES
SALEEBY RANSIER, P.A.
359 SOUTH COUNTY ROAD
PALM BEACH, FLORIDA 33480-4494

RICHARD E. SALEEBY
RONALD RANSIER (Ret.)
T. GRAF BUCKENMAIER, JR.

TELEPHONE (561) 655-5766
FAX (561) 655-0265

PLEASE REPLY TO:

May 9, 2003

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

RE: 335 Coconut Row, L.L.C.

Dear Sir:

Enclosed please find a check in the amount of \$155.00 and the Articles of Organization for Florida Limited Liability Company for Perfect Smile, LLC. We would appreciate a Certified Copy of the Articles, all on letter size paper. (8 1/2 x 11) if at all possible.

If for any reason these Articles cannot be recorded, please telephone us at (561) 655-5766.

Thank you for your courtesy and cooperation in this matter.

Most Sincerely,



T. Graf Buckenmaier

TGB/sg
Enclosures

FILED
2003 MAY 14 AM 8:29
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name

The name of the Limited Liability Company is:

335 Coconut Row, L.L.C.

ARTICLE II – Address

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

250 Worth Avenue, Palm Beach, Florida 33480

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature

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

Edward M. Kassatly

NAME

250 Worth Avenue

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Palm Beach, Florida 33480

CITY, STATE and ZIP

Having been named as registered agent and to accept service of process for the above stated 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 as provided in Chapter 608 F.S.

Edward M. Kassatly

Registered Agent's Signature

ARTICLE IV – Management (Check box if applicable)

The Limited Liability Company is to be managed by a manager or more managers and, is therefore, a manager - managed company.

Edward M. Kassatly

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.)

Edward M. Kassatly

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
2003 MAY 14 AM 8:29
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA