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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

russel hamarnah, d.m.d., pllc

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Articles of Organization of

RUSSEL HAMARNAH, D.M.D., PLLC

The undersigned natural person(s), of the age of eighteen years or more, setting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

Article 1. Name of Limited Liability Company

The name of this limited liability company is RUSSEL HAMARNAH, D.M.D., PLLC

Article 2. Registered Office and Registered Agent

The initial registered office of this limited liability company and the name of its initial registered agent at this address are:

Russel Hamarnah

6900 SW 39th Street, #309

Davie, FL 33314

Article 3. Statement of Purposes

The purposes for which this limited liability company is organized are:

To engage in the lawful practice of dentistry, and to provide dental services to the general public under the laws of the State of Florida.

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Article 4. Management and Names and Addresses of Initial Manager

This will be a manager-managed company. The name and address of each manager is:

Russel Hamarnah

6900 SW 39th Street, #309

Davie, FL 33314

Article 5. Principal Place of Business of the Limited Liability Company

The principal place of business of the limited liability company shall be:

6900 SW 39th Street, #309

Davie, FL 33314

Article 6. Period of Duration of the Limited Liability Company

The period of duration of the limited liability company shall be:

"Perpetual"

Article 7. Company Existence

The Company's existence shall begin effective as of Juli 11, 2005.

The undersigned authorized representative of a member SAR executed these Articles of Organization on 7/11/2005.

The Law Offices of Max A. Adams

Max A. Adams, Esq.

10L-11-2005 11:53

STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

RUSSEL HAMARNAH, D.M.D., PLLC

REGISTERED AGENT/OFFICE:

Russel Hamarnah

6900 SW 39th Street, #309

Davie, FL 33314

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

Russel Hamarnah

by Max Adams as attorney-in-fact

Date: 7/11/2005

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SECRETARY OF STATE