

L05000104885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

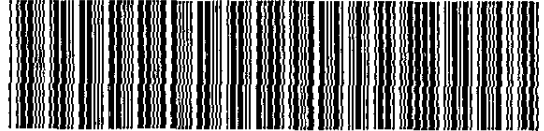
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 671809 5674A

AUTHORIZATION :

COST LIMIT : \$ 48.75

ORDER DATE : October 25, 2005

ORDER TIME : 5:24 PM

ORDER NO. : 671809-005

CUSTOMER NO: 5674A

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: SHELDON ROAD DENTAL CENTER,  
LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney - EXT. 2916

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
SHELDON ROAD DENTAL CENTER, LLC**

**FILED**  
05 OCT 26 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name**

The name of the Limited Liability Company is **SHELDON ROAD DENTAL CENTER, LLC.**

**ARTICLE II — Address**

The mailing address and street address of the principal office of the Limited Liability Company is 28100 U.S. Highway 19 North, Suite 511, Clearwater, Florida 33761.

**Article III — Registered Agent, Registered Office**

The name and the Florida street address of the initial registered agent are Jason Lesser, 28100 U.S. Highway 19 North, Suite 511, Clearwater, Florida 33761.

**Article IV — Management**

The Limited Liability Company is to be managed by the members and is, therefore, a member-managed company.

**IN WITNESS WHEREOF**, I have signed these Articles of Organization as a member and acknowledged them to be my act this 25th day of October, 2005.

  
JASON LESSER

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

Jason Lesser

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

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

  
JASON LESSER