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Fax Number : (850) 205-0383

From: Account Name : COX & NICI
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LIMITED LIABILITY COMPANY

Thomas P. Hale, D.D.S., P.L.

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**ARTICLES OF ORGANIZATION OF
THOMAS P. HALE, D.D.S., P.L.**

**ARTICLE I
NAME**

The name of this Professional Limited Liability Company is THOMAS P. HALE, D.D.S., P.L. (the "Company").

**ARTICLE II
DURATION**

The period of duration for the Company is perpetual.

**ARTICLE III
ADDRESS**

The mailing address and street address of the principal office of the Company is:

Thomas P. Hale
9810 Gallaria Ct., Suite 100
Naples, FL 34109

**ARTICLE IV
REGISTERED OFFICE AND AGENT**

The initial registered office of this Company shall be c/o Cox & Nici, 1185 Immokalee Road, Suite 110, Naples, Florida 34110, and its initial registered agent at such office shall be James R. Nici.

**ARTICLE V
MANAGEMENT**

The Company is to be a Manager-Managed company and the name and address of the elected Managers who shall serve as Managers until the first annual meeting or until their successors are chosen are:

Thomas P. Hale, D.D.S.
9810 Gallaria Ct., Suite 100
Naples, FL 34109

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ARTICLE VI
PURPOSE-GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this professional limited liability company will be:


a) To engage in every phase and aspect of the business of rendering the same professional services to the public that a Doctor of Dentistry duly licensed under the laws of the State of Florida is authorized to render, but such professional services will be rendered only through officers, employees and agents of the Company who are duly licensed under the laws of the State of Florida to practice dentistry therein;

b) To invest the funds of the Company in real estate, mortgages, stocks, bonds or any other type of investment, and to own or lease real and personal property necessary for the rendering of such professional services; and

c) To do anything necessary and proper for the accomplishment or furtherance of any purposes or objectives of the Company enumerated in these Articles of Organization or any amendment thereto, and to do any act necessary or incidental to the protection and benefit of the Company; and in general, either alone or in association with other companies, firms or individuals, to carry on any lawful pursuit necessary or incidental to the accomplishment or furtherance of such purposes or objectives of the Company.

d) It is intended that this Company may conduct and transact any business lawfully authorized and not prohibited by Chapter 608 and Chapter 621, Florida Statutes, as the same may be from time to time amended.

Dated this 2nd day of November, 2005.


James R. Nici, as Authorized Representative

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the Company is Thomas P. Hale, D.D.S., P.L.
2. The name and address of the registered agent and office is:

James R. Nici, Esq.
c/o Cox & Nici
1185 Immokalee Road, Suite 110
Naples, Florida 34110

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 for in Chapter 608, Florida Statutes.

Dated: November 2, 2005

By: _____

James R. Nici, Esq.
Initial Registered Agent

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