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Florida Department of State

Division of Corporations Public Access System 3

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LIMITED LIABILITY COMPANY

TAGS, P.L.C.

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### ARTICLES OF ORGANIZATION

OF

#### TAGS, P.L.C.

### a Florida Professional Limited Liability Company

#### ARTICLE I NAME

The name of this Professional Limited Liability Company is TAGS, P.L.C. (the "Company").

## ARTICLE II ADDRESS

The mailing address of the Professional Limited Liability Company is:

1245 Court Street, Suite 102 Clearwater, FL 33765

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

1245 Court Street, Suite 102 Clearwater, FL 33765

# ARTICLE III DURATION

This Company's existence shall commence upon the acceptance of the Articles of Organization by the Secretary of State of Florida and shall continue in existence until the expiration of lifty (50) years from such commencement date, unless sconer terminated, liquidated, or dissolved by law or by the unanimous consent of the Members.

Ala 1 S. Gassottut, Esquire 124 l Court Street, Suite 102 Clourwater, #1 33756 (7%) 442-1201 Flor (da Bar #171780

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## ARTICLE IV MANAGEMENT

The Professional Limited Liability Company is to be managed by its sole Member and the name and address of such Member who is to serve is:

Roberto Taglione, D.D.S., M.D. 1151 Delaney Avenue Orlando, FL 32806

## ARTICLE V ADMISSION OF NEW MEMBERS

The sight, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

The manager may admit new members in its sole and unfettered discretion subject only to the condition that such additional member must agree in writing to be bound as a nember by the Operating Agreement of the Company.

## ARTICLE VI MEMBERS RIGHTS TO CONTINUE BUSINESS

The light, if given, of the remaining members of the professional limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the professional limited liability company shall be:

The leath, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the professional limited liability company shall not terminate the company, and the business of the company shall be automatically continued, so long as there is at least one remaining member.

Alan S. Gassman, Esquire 1245 Court Stor et, Suite 162 Classwater, FI 33756 (727) 442-1200 Flori in Bur # 3:1750

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#### ARTICLE VI NATURE OF BUSINESS

The purpose for which the professional limited liability company is organized shall be to engage in and carry on all branches of the practice of dentistry within the State of Florida, and to do those things that are necessary or proper in connection with that practice.

AUTHORIZED REPRESENTATIVE OF MEMBER TAGS, P.L.C.

ALAN S. GASSMAN

STATE OF FLORIDA )
COUNTY OF PINELLAS )

The oregoing instrument was acknowledged before me this 7 day of November , 200%, by Al. AN S. GASSMAN, as Authorized Representative of TAGS, P.L.C., who is personally known to me.

With ess my hand and official seal in the county and state last aforesaid on the day and year first written above.

Notary Public, State of Florida My Commission Expires:



Alan S. Gassmar, Esquire 1245 Court Streat, Suite 102 Clearwater, FL 33756 (727) 442-1266 Flori la Bar # 3"1750

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#### ACCEPTANCE OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Professional Limited Liability Company submits the following statement to designate a Registered Office and Degistered Agent in the State of Florida:

The name of the Professional Limited Liability Company is: TAGS, P.L.C.

The name and Florida street address of the Registered Agent are:

Alan S. Gassman, Esquire 1245 Court Street Suite 102 Clearwater, FL 33756

Having been named as Registered Agent and to accept service of process for the above stated professions. I 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.

ALAN S. GASSMAN

JATVInglione, Reperto, D.D.S., M.DATAGS, P.L.C.Articles of Organization Lwpd tis 11/7/05

AJan S. Gassman, Esquire 1245 Court Street, Suite 102 Clost water, Fl. 33756 (727) 442-1200 Flor da Bar # :! 11750

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