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#### Spa Dentistry, LLC 4050 Tampa Road Oldsmar, FL 34677

December 19, 2005

State of Florida Registration Section P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed you will find two original copies of the Articles of Organization for Spa Dentistry, LLC In addition, you will find a check made payable to the Division of State in the amount of \$125.00 representing the filing fee and designation of registered agent fee.

Please return one copy of the Articles of Organization with the filing date stamped on them.

If I can answer any question with regard to the above, please do not hesitate to contact me.

Sincerely,

Sally W. Insko Manager



January 9, 2006

SALLY W. INSKO 4050 TAMPA ROAD OLDSMAR, FL 34677

SUBJECT: SPA DENTISTRY, L.L.C. Ref. Number: W06000000921

We have received your document for SPA DENTISTRY, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 106A00001399

Neysa Culligan Document Specialist

Division of Companytions DO DOY 6227 Tallahagges Florida 2221/

## ARTICLES OF ORGANIZATION OF SPA DENTISTRY, L.L.C.

FILED 06 JAN 20 PH 1: 56

ARTICLE 1 - NAME

SECRETART OF STATE TALLAHASSEE, FLORIDA

The name of this Limited Liability Company is SPA DENTISTRY, L.L.C.

#### ARTICLE II - DURATION

This Limited Liability Company shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State.

#### ARTICLE III - PURPOSE

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which Limited Liability Companies may be organized under Chapter 608, Florida Statutes, as now exists or may after be amended.

#### ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The principal address of the Limited Liability Company is 4050 Tampa Road, Oldsmar, FL 34677, the address of the initial registered office is 4050 Tampa Road, Oldsmar, FL 34677; and the name of the initial registered agent of this Limited Liability Company at that address is Sally W. Insko.

#### ARTICLE V -MANAGEMENT

This Limited Liability Company is to be managed by one member-manager and is, therefore, a member-managed company. The number of managers may be either increased or decreased from time to time by membership operating agreement; however, there shall never be less than one member-manager or more than five. The name and address of the initial Member-Managers of the Limited Liability Company are:

Sally W. Insko 4050 Tampa Road Oldsmar, FL 34677

#### ARTICLE VI - INDEMNIFICATION

The Limited Liability Company shall indemnify any Manager or any former Manager, to the full extent permitted by law.

#### ARTICLE VII - NONLIABILITY

The members and manager, if any, shall not be liable for any debts, obligations or liabilities of the limited liability company.

#### ARTICLE VIII - AMENDMENT

This Limited Liability Company reserves the right to amend or repeal any provision contained in these Articles of Organization, or any amendment hereto, by a majority vote of the Member-Managers, and any right conferred upon the member-managers is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Manager has executed these Articles of Organization on the 28 \_\_\_ day of December, 2005.

Sally W. Insko Member Manager

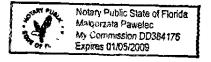
STATE OF FLORIDA COUNTY OF PINELLAS

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Sally W. Insko, known to be and known by me to be the person who executed the foregoing Articles of Organization, and she acknowledged before me that she executed those Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above, this 28 of December, 2005.

Malgonoto Howelec
NOTARY PUBLIC, State of Florida at Large

My commission expires:



### CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of Section 608., Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the Limited Liability Company is: Spa Dentistry, L.L.C.
- 2. The name and address of the registered agent and office is:

Sally W. Insko  4050 Tamba Road  Oldsmar, FL: 34677	
Oldsmar Fir 346TI	
Chasmary English	
Sally W. This	
	Signature
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<u> </u>	
	Title
12 28 2005	
	Date

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATAIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATION OF SECTION 608 FLORIDA STATUTES.

Signature - Registered Agent 12 28 2005

6 JAN 20 PH 1:5