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FLORIDA/FOREIGN LIMITED LIABILITY CO

Mubashir A. Chaudhry, DMD, P.A.

Certificate of Status	1
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May 3, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SEMPER WOODS

SUBJECT: MUBASHIR A. CHAUDERY, DMD, ~~PL~~ PLLC
REF: W06000020621

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of a professional limited liability company must end with P.L.C., P.L.L.C., PL, PLC, PLLC PROFESSIONAL LIMITED COMPANY, CHARTERED, or PROFESSIONAL LIMITED LIABILITY COMPANY.

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**ARTICLES OF ORGANIZATION
OF
MUBASHIR A. CHAUDHRY, DMD, PLLC**

ARTICLE I - NAME

The name of the limited liability company is Mubashir A. Chaudhry, DMD, PLLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

Lot 1198
891 Outer Road
Orlando, Florida 32814

Mailing Address:

530 Spring Club Drive
Altamonte Springs, Florida 32714

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Nishad A. Khan, Esq.
530 Spring Club Drive
Altamonte Springs, Florida 32714

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, F.S..



Nishad A. Khan, Esq.

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ARTICLE IV - BUSINESS PURPOSE

The primary purposes of the Company shall be to provide dental services.

ARTICLE V - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGR

Mubashir A. Chaudhry
530 Spring Club Drive
Altamonte Springs, Florida 32714

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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.)

Nishad A. Khan, Esq.

Typed or printed name of signer

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