Florida Department of State Division of Corporations

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From:

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Account Number : 120050000131 Phone : (305)887-9060

Fax Number : (305)888-3192

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of CL	ORIDA/FOREIGN LIMITED LIABILITY CO. Hisham S. Ayoub, D.M.D., PLLC		
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Articles of Organization of

HISHAM S. AYOUB, D.M.D., PLLC

The undersigned natural person(s), of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

Article 1. Name of Limited Liability Company

The name of this limited liability company is HISHAM S. AYOUB, D.M.D., PLLC

Article 2. Registered Office and Registered Agent

The initial registered office of this limited liability company and the name of its initial registered agent at this address are:

HISHAM S. AYOUB

9609 NW 7th CIRCLE, SUITE 432

PLANTATION, FLORIDA 33324

Article 3. Statement of Purposes

The purposes for which this limited liability company is organized are:

To engage in the lawful practice of dentistry, and to provide dental services to the general public under the laws of the State of Florida.

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Article 4. Management and Names and Addresses of Initial Manager

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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This will be a manager-managed company. The name and address of each manager is:

HISHAM S. AYOUB

9609 NW 7th CIRCLE, SUITE 432

PLANTATION, FLORIDA 33324

Article 5. Principal Place of Business of the Limited Liability Company

The principal place of business of the limited liability company shall be:

9609 NW 7th CIRCLE, SUITE 432

PLANTATION, FLORIDA 33324

Article 6. Period of Duration of the Limited Liability Company

The period of duration of the limited liability company shall be:

"Perpetual"

Article 7. Company Existence

The Company's existence shall begin effective as of August 24, 2006.

The undersigned authorized representative of a member executed these Articles of Organization on 08/24/2006.

The Law Offices of Max A. Adams

Max A. Adams, Esq.

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STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

HISHAM S. AYOUB, D.M.D., PLLC

REGISTERED AGENT/OFFICE:

HISHAM S. AYOUB

9609 NW 7th CIRCLE, SUITE 432

PLANTATION, FLORIDA 33324

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

HISHAM S. AYOUB

by Max Adams as attorney-in-fact

Date: 08/24/2006