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ORDER DATE : May 11, 2007
ORDER TIME: 5:09 PM
ORDER NO. : 895820-005
CUSTOMER NO: 81093A
DOMESTIC FILING
NAME: SMILES WITH STYLE, P.L.
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight - EXT. 2956
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION

OF

SMILES WITH STYLE, P.L.

THE UNDERSIGNED, AQUILES J. MAS, for the purpose of forming a professional limited liability company under the Florida Statutes Chapters 608 and 621, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be SMILES WITH STYLE, PL, ("Company").

ARTICLE II - PRINCIPAL OFFICE

The principal office of the Company in Florida shall be: 3877 Tamiami Trail East, Naples, FL 34112.

ARTICLE III - MAILING ADDRESS

The mailing address of the Company in Florida is: 3877 Tamiami Trail East, Naples, FL 34112.

ARTICLE IV - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed with the Florida Department of State. The Company's existence shall be perpetual unless the Company is dissolved as provided in these Articles of Organization.

ARTICLE V - PURPOSE AND POWERS

The sole and specific purpose for which the Company is organized is the medical practice of general dentistry and all matters related thereto. The Company shall have all the powers granted to a Professional Limited Liability Company under the laws of the State of Florida.

ARTICLE VI - REGISTERED OFFICE AND AGENT

The name and street address of the Registered Agent of the Company in the State of Florida is: MICHAEL B. HILL, 9100 College Pointe Court, Fort Myers, FL 33919.

ARTICLE VII - MANAGEMENT AND MEMBERS

The Company shall be a manager-managed company. The Operating Agreement adopted by the Company may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with Florida law or these Articles of Organization. The initial Manager of the Company is: AQUILES J. MAS. The initial Member of the Company is: AQUILES J. MAS.

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IN WITNESS WHE Organization at Fort Myer				
	3	quilés J. Mas) •
STATE OF FLORIDA				
COUNTY OF LEE				
	strument was acknown by AQUILES J. MAS, v cense as identification	who () is perso	me this	day of me or (—) has
(Seal) Comm. Expires Comm. No.	DOROTHY V. BERRY MY COMMISSION # DD 356516 EXPIRES: October 15, 2008 Bandad Thru Notary Public Undenvirters	Notary Pub DOROTHY Printed Nam	A. C. BERRY ne of Notary	erry

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for SMILES WITH STYLE, P.L., at the place designated herein, 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. I am familiar with and accept the obligations of my position as registered agent, as provided for in Chapter 608, Florida Statutes.

Michael B. Hill

Date: 17 2007