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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
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COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: Dental Careers Of Tampa Bay LLC

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

> Rodney Holcombe Dental Careers Of Tampa Bay LLC 15303 Amberly Dr. Ste. D Tampa, Florida 33647



For further information concerning this matter, please call:

Rodney Holcombe – 813 972-9077

Enclosed is a check for the following amount:

✓ \$125.00 Filing Fee_ \$130.00 Filing Fee& __\$155.00 Filing Fee& __\$160.00 Filing Fee,

Certificate of Status

Certified Copy (Additional copy is enclosed)

Certificate of Status & Certified Copy (Additional copy is

enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee; Fl. 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company is:

DENTAL CAREERS OF TAMPA BAY LLC

ARTICLE II- Address:

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

Principal office address:

Mailing Address:

15303 Amberly Drive

15303 Amberly Drive

Ste. D

Ste. D

Tampa, Fl. 33647

Tampa, Fl. 33647

ARTICLE III- Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida Registration.)

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

Rodney Holcombe 15303 Amberly Dr. Ste. D Tampa, Florida 33647

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the certificate. I hereby accept the appointment as registered agent and agree to act in the capacity. I further agree to comply with the provisions of all statues 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..

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

Name and Address:

"MGR" = Manager

"MGRM"= Managing Member

Rodney Holcombe

15303 Amberly Dr. Ste. D Tampa,Fl. 33647

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Rodney Holcombe

Filing Fees:

\$125.00 Filing fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)
\$5.00 Certificate of Status (Optional)

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