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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : QUARLES & BRADY LLP

Account Number : I20000000067

Phone

: (239)262-5959

Fax Number

: (239)434-4999

LORIDA/FOREIGN LIMITED LIABILITY CO.

CHILDREN'S DENTISTRY OF NAPLES, L.L.C.

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Certificate of Status	0
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Page Count	01
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EXAMINER

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ARTICLES OF ORGANIZATION

OF

CHILDREN'S DENTISTRY OF NAPLES, L.L.C.

The undersigned member hereby certifies that the members have associated themselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

ARTICLE I

NAME

The name of the limited liability company shall be CHILDREN'S DENTISTRY OF NAPLES, L.L.C. (the "Company").

ARTICLE II

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this Company \$3699 Airport Road North, Naples, Florida 34105.

ARTICLE III

REGISTERED AGENT

The name and address of the initial registered agent in the State of Florida is 100 NAPLES-LAWDOCK, INC., 1395 Panther Lane, Suite 300, Naples, Florida 34109

ARTICLE IV

MANAGEMENT

The Company will be managed by members in accordance with the Company's Operating Agreement.

ARTICLE V

RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members upon making such contributions as are set out in the Operating Agreement, and otherwise complying with and agreeing to the terms and provisions of the Operating Agreement.

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ARTICLE VI

MEMBERS' RIGHTS TO CONTINUE BUSINESS

Upon the death, bankruptcy, or other dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the Company, the existence of the Company shall continue.

Executed by the undersigned member at Naples, Florida on the 27 day of January, 2008.

Gerardo Santiago

STATE OF FLORIDA COUNTY OF COLLIER

This foregoing instrument was acknowledged before me this $\frac{29}{2}$ day of January. 2008, by Gerardo Santiago, who (___) is personally known to me or who (\times) has produced as identification.

_(SEAL)

MANETTA KANEFSKY
Notary Public, State of Florida
My comm. Expirat May 09, 2009
Comm. No. DD 422295
Randed thru State Farm Fire & Casualty Co.

Notary Public

Print name: Mane +

My commission expires

05-09-09

OB JAN 29 PM 1: 12
SECRETARY OF STATE
TALLAHASSEE, FLORID.

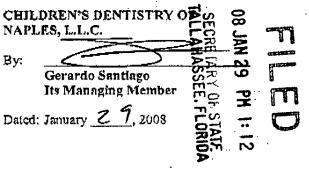
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CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

The name of the limited liability company is CHILDREN'S DENTISTRY OF NAPLES, L.L.C.

The name of the initial registered agent of the limited liability company is NAPLES-LAWDOCK, INC., its agent to accept service of process within Florida with a registered office located at 1395 Panther Lanc, Suite 300, Naples, Florida 34109:



REGISTERED AGENT ACCEPTANCE

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, NAPLES LAWDOCK, INC. hereby accepts the appointment as registered agent and agrees to act in that capacity. NAPLES LAWDOCK, INC. further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and NAPLES LAWDOCK, INC. is familiar with and accepts the obligations of its position as registered agent.

NAPLES LAWDOCK, INC., a Florida corporation

Pimothy G. Hairs, Its President

Dated: January 29 , 2008

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