

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L08000089534
FILED 8:00 AM
September 19, 2008
Sec. Of State
dbruce**

Article I

The name of the Limited Liability Company is:

LUPU DENTAL, LLC

Article II

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

14035 S CYPRESS COVE CR.
DAVIE, FL. US 33325

The mailing address of the Limited Liability Company is:

14035 S CYPRESS COVE CR.
DAVIE, FL. US 33325

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

AIDA LUPU
14035 S CYPRESS COVE CR.
DAVIE, FL. 33325

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.

Registered Agent Signature: AIDA LUPU

Article V

The name and address of managing members/managers are:

Title: MGR
AIDA LUPU
14035 S CYPRESS COVE CR.
PLANTATION, FL. 33325 US

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Signature of member or an authorized representative of a member

Signature: AIDA LUPU