

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

L09000113948  
FILED 8:00 AM  
November 30, 2009  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:

DENTAL SPECIALISTS OF NORTH FLORIDA LLC

**Article II**

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

3 CYPRESS BRANCH WAY  
SUITE 107  
PALM COAST, FL. 32164

The mailing address of the Limited Liability Company is:

3 CYPRESS BRANCH WAY SUITE 107  
PALM COAST, FL. 32164

**Article III**

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

PRACTICE OF DENTISTRY

**Article IV**

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

WILLIAM H OCONNELL  
2825 LEWIS SPEEDWAY  
SUITE 104  
ST AUGUSTINE, FL. 32084

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: WILLIAM H OCONNELL

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ROBERT R THOUSAND JR  
124 INLET DR  
ST AUGUSTINE, FL. 32080

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### **Article VI**

The effective date for this Limited Liability Company shall be:

11/30/2009

Signature of member or an authorized representative of a member

Signature: ROBERT R THOUSAND JR