L11000044510

(5)		
(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
/Ru	siness Entity Nar	ne)
(Du	Siness Chuty (var	ne,
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
		ŀ
		į
		j

Office Use Only

B. KOHR

APR 1 4 2011

EXAMINER



500201410375

04/14/11--01005--003 **155.00

B. KOHR

APR 1 4 2011

EXAMINER

AUSLEY & MCMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

April 14, 2011

Florida Secretary of State Division of Corporations 2661 Executive Center Circle West Tallahassee, Florida 32301

RE: <u>Tallahassee</u> Orthodontics, P.L.

Dear Sir or Madam:

Enclosed for filing are Articles of Organization for the above-referenced company and our check for \$155.00. Also enclosed is an extra copy of the Articles for the certified copy. Please call Chris Vause at 425-5446 when the certified copy is ready to be picked-up.

Thank you for your assistance.

Sincerely,

Chris Vause

Secretary to Robert A. Pierce

/cv Enclosures



ARTICLES OF ORGANIZATION OF TALLAHASSEE ORTHODONTICS, P.L.

The undersigned, pursuant to the provisions of Chapter 621, Florida Statutes, provides the following information for the purpose of forming a Professional Limited Liability Company under the laws of the State of Florida.

ARTICLE 1. Name

The name of the Professional Limited Liability Company is **Tallahassee Orthodontics**, **P.L.**

ARTICLE 2. Address

The street and mailing address of the place of business in Florida are:

140 Meridianna Drive Tallahassee, Florida 32312

ARTICLE 3. Purpose

The purpose for which this Professional Limited Liability Company is formed is to engage in the practice of dentistry, orthodontic dentistry, or any other lawful business permitted to be engaged in by a professional limited liability company.

ARTICLE 4. Registered Agent and Registered Office

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Robert A. Pierce

123 South Calhoun Street Tallahassee, Florida 32301-1517

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, I hereby accept the appointment as registered agent and agree to act in this capacity. I

Tallahassee Orthodontics, P.L. ARTICLES OF ORGANIZATION Page 1 of 2 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 as provided for in Chapter 608, Florida Statutes.

Robert A. Pierce, Registered Agent

Rolut To Hen

ARTICLE 5. Management

The Professional Limited Liability Company shall be managed by its Members and is, therefore, a Member-managed company. The name and address of each Managing Member are as follows:

Peter Jason Goltz, MGRM

140 Meridianna Drive Tallahassee, Florida 32312

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13th day of April, 2011.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

ROBERT A. PIERCE, as

Representative of the Members

h:\tax\rap\talla orthodontics\articles.doc

Tallahassee Orthodontics, P.L. ARTICLES OF ORGANIZATION Page 2 of 2