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: FRANK GUTTA CPA PA Account Name

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## FLORIDA LIMITED LIABILITY CO.

Frank Kalafatic, DDS, PLLC

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**EXAMINER** 

Fax Audit #: H120000679403

### ARTICLES OF ORGANIZATION

OF

Frank Kalafatic, DDS, PLLC

The undersigned, acting as organizer of Frank Kalafatic, DDS, PLLC for the purpose of professional dentistry organized and created pursuant to Chapter 608, Florida Statutes, hereby adopt the following Articles of Organization for said Florida professional limited liability company:

#### ARTICLE L

The name of the limited liability company shall be:

Frank Kalafatic, DDS, PLLC

#### ARTICLE II.

The mailing and street address of the principal office of the limited liability company is:

1100 SE 5th Ct. #53 Pompano Beach, FL 33060

#### ARTICLE III.

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

Frank Kalafatic 1:100-SE 5<sup>th</sup> CL #53 Pompano Beach, FL 33060 12 MAR I 4 AM II: 13
ESTATE LASY OF STATE
FALL ANASSEE, FLORMOA

Having been named as registered agent and to accept service of process for the above stated professional 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 as provided for in Chapter 608, F.S.

Frank Kalafatic, Registered Agent

Prepared by: Frank Gutta & Co. CPA's PA 490 Sawgrass Corporate Parkway Suite 310 Sunrise, FL 33325 Phone: (954) 452-8813 Faz: (954) 462-8359

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#### ARTICLE IV.

This professional limited liability company is to be managed by one member and is therefore a member-managed company. The name and address of each Manager or Managing Member is as follows:

Prank Kalafatic- Managing Member 1100 SB 5th Ct. #53 Pompano Beach, FL 33060

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

Frank Kalafatic, Managing Member \*Signature of Member or authorized representative of a member

Propared by: Frank Gutta & Co. CPA's PA 490 Sawgrass Corporate Parkway Suite 310 Sunrise, FL 33325 Phone: (954) 452-8813 Fax: (954) 452-8359

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