#12000148366

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special lastructions to Filing Officer				
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SEURETARY OF STATE
ALL MIASSEF FELOPINA

K. SALY EXAMINER NOV 27 2012



General and Cosmetic Dentistry • Treatment of Snoring and Sleep Apnea • Implant placement and restoration

November 21, 2012

To whom it may concern:

Paul R Hinder is requesting the registration of his new business Paul R Hinder Lab, LLC

700 3rd St, Suite 203, Neptune Beach, FL 32266

904-247-3074 office

904-247-3078 fax

904-651-2103 cell

Please call me with any questions. Thank you.

Paul Hinder

COVER LETTER

TO:	Registration Section Division of Corporations		Lah	
SUBJE	CT: Paul R	Hinder	ed Liability Company	<u></u>
		Name of Limit	ed Clability Company	
The enc	losed Articles of Organizat	on and fee(s) are s	submitted for filing.	
Please r	eturn all correspondence co	ncerning this matt	er to the following:	
_		Paul	R Hinder	
	•		. Tallie of Felbon	
_	Paul R	Hind	er Lab, LL	<u></u>
			Firm/Company	
_	700	3rd	St STE	203
_	Neptune	Beach	y/State and Zip Code com or future annual report notification)	266
		City	y/State and Zip Code	
_	prhinder E-mail a	ddress: (to be used f	or future annual report notification)	
For furth	ner information concerning			
_	_	•		
Po	cul K Hinds	rr	at (904) 247 Area Code & Daytime Telep	- 3074
	14aine oi Peison		Area Coue & Dayume Telep	mone rannoer
Enclose	ed is a check for the follo	wing amount:		
\$125.0	00 Filing Fee □\$130. 0	0 Filing Fee &	□\$155.00 Filing Fee & □	\$160.00 Filing Fee,
	Certifi	cate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
		Address ion Section	Street/Courier Address Registration Section	
	Division	of Corporations	Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	EFFECT
The name of the Limited Liability Company is:	11-30-2012
Paul R Hinder (Must end with the words "Limited Liability	Lab, LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
700 3rd St, STE 203 Neptune Beach, FL 32266	ESAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Paul R H	linder 55 5
700 3 Ad	St, STE 203 26 26 26 26 26 26 26 26 26 26 26 26 26
Neptune Beach City, State	St STE 203 26 F. STE 32266 e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacit all statutes relating to the proper and complete	ccept service of process for the above stated limited its certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of performance of my duties, and I am familiar with istered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	re (REOLURED)
registered /tgent s bigintu	iv (negotices)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member CR	Paul R Hinder 700 3rd St, STE 203 Neptune Beach, FL 32266
(Use attachment if necessary) LE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)	e date of filing: (OPTIONAL) t be specific and cannot be more than five business of
REQUIRED SIGNATURE:	
Signature of a membe	er or an authorized representative of a member.
(In accordance with section 608 constitutes an affirmation under	8.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)