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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

NOV -1 2013

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parrish Family Dentistry

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. Danny C. Parrish

Name of Person

Parrish Family Dentistry

Firm/Company

814 Pheasant Run Court West

Address

Port Orange, FL 32127

City/State and Zip Code

Gatorfloss@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danny Parrish

Name of Person

at (386) 679-8989

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION
OF
PARRISH FAMILY DENTISTRY, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as the organizer of Parrish Family Dentistry, LLC, under the Florida Limited Liability Company Act, Chapter 608, Fla. Stat., adopts the following Articles of Organization:

ARTICLE I - Name:

The name of the limited liability company is Parrish Family Dentistry, LLC (the "Company").

ARTICLE II - Address:

The mailing address and the street address of the Company is 729 Dunlawton Ave, Port Orange, Florida 32127.

ARTICLE III - Duration:

The period of duration for the Company shall be perpetual, unless dissolved in accordance with the terms of the Operating Agreement of the Company.

ARTICLE IV - Management:

The Company is to be managed by its Member(s), unless and until one or more managers are appointed in accordance with the Operating Agreement of the Company, in which case the Company shall be managed by one or more managers. The managers shall be elected as described in the Operating Agreement.

ARTICLE V - Admission of Additional Members:

The Company shall admit new Members only upon the written consent of the then existing Members of the Company owning a majority of the outstanding percentage interest in the Company.

ARTICLE VI - Adoption of Operating Agreement:

The Company shall adopt an Operating Agreement for the Company, which Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with these Articles of Organization or Chapter 608, Fla. Stat.

ARTICLE VII - Initial Registered Agent and Office:

The initial registered agent for the Company shall be Danny C. Parrish, and the street address of the Company's initial registered office is 729 Dunlawton Ave., Port Orange, Florida 32127.

ARTICLE VIII - Amendments:

The Company reserves the right to amend any provision of these Articles of Organization, which amendment shall only be effectuated in accordance with the terms of the Operating Agreement of the Company.

ARTICLE IX - Continuation of Business:

Unless dissolved in accordance with the Company's Operating Agreement, the remaining members shall continue the business of the Company, which shall not be dissolved, upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member.

IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization as of this 24 day of October, 2013.



Danny C. Parrish, Authorized Representative

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.


1. The name of the limited liability company is Parrish Family Dentistry, LLC.
2. The name and address of the registered agent and office is:

Danny C. Parrish

Port Orange, Florida 32127

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.

DANNY C. PARRISH

By: 
Title: President

Dated this 24 day of October, 2013.