

# L14000153433

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**FLORIDA LIMITED LIABILITY CO.  
Patient's Choice Dental Warranty, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
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10/1/2014 8:22:28 AM PAGE 1/001 Fax Server



October 1, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

REZLEGAL, LLC

SUBJECT: PATIENT'S CHOICE DENTAL WARRANTY, LLC  
REF: W14000059700

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The registered agent name must be consistent wherever it appears in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

FAX Aud. #: H14000228653  
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**ARTICLES OF ORGANIZATION  
OF  
PATIENT'S CHOICE DENTAL WARRANTY, LLC**

**H14000228653 3**  
FILED  
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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

Pursuant to Section 605.0201 of the Florida Revised Limited Liability Company Act, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

**ARTICLE I  
NAME**

The name of the limited liability company is Patient's Choice Dental Warranty, LLC (the "Company").

**ARTICLE II  
EFFECTIVE DATE AND DURATION**

The effective date upon which this Company shall come into existence shall be the date these Articles of Organization are filed. Unless earlier terminated pursuant to the Act or the Operating Agreement (as defined in § 605.0105 of the Act) of the Company, the period of its duration shall be perpetual.

**ARTICLE III  
ADDRESS**

The mailing address of the Company shall be P.O. Box 37737, Jacksonville, Florida 32236 and the street address of the principal office of the Company shall be 909 Oriental Gardens Road, Jacksonville, Florida 32207.

**ARTICLE IV  
REGISTERED AGENT AND OFFICE**

The initial registered office of the Company shall be 909 Oriental Gardens Road, Jacksonville, Florida 32207, and its initial registered agent at such office shall be Jane Querido.

**ARTICLE V  
MANAGEMENT OF THE COMPANY**

The Company will be managed by its members in accordance with and subject to the requirements of the Act and Operating Agreement of the Company.

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IN WITNESS WHEREOF, the undersigned member of the Company has executed these Articles of Organization on behalf of the Company in accordance with § 605.0201 of the Act.

Dated this 26th day of September, 2014.

By: 

June Quintero, Member

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**CERTIFICATE DESIGNATING REGISTERED OFFICE  
AND  
REGISTERED AGENT FOR THE SERVICE OF PROCESS  
WITHIN FLORIDA**

In compliance with Chapter 605, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

Patient's Choice Dental Warranty, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates Jane Querido as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 909 Oriental Gardens Road, Jacksonville, Florida 32207.

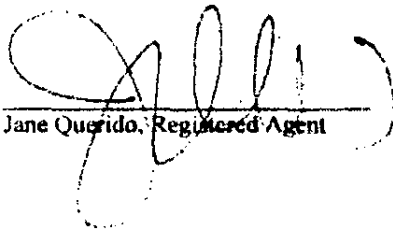
Dated this 21st day of September, 2014.

By: 

Jane Querido, Member

Having been named as registered agent to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby agree to 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.

Dated this 21st day of September, 2014.

  
Jane Querido, Registered Agent

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