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## FLORIDA LIMITED LIABILITY CO.

#### **Emerald Smiles PLLC**

Certificate of Status	0
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### ARTICLES OF ORGANIZATION OF **Emerald Smiles PLLC**

ARTICLE I

NAME

The name of the limited liability company is: Emerald Smiles PLLC

ARTICLE II

**ADDRESS** 

The principal place of business and mailing address of this Limited Liability Company shall be: 10271 Porto Romano Dr., Miramar Lakes, Florida 33913.

#### INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE III

The name and address of the registered agent are: Parisa Chamani, 10271 Porto Romano Dr., Miramar Lakes, Florida 33913. Located in the County of LEE.

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 ma position as registered agent as provided for in Chapter 605, F.S.

Signature:

Parisa Zhamani

Date: NOV. 14 2014

ARTICLE IV

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is: Parisa Chamani, 10271 Porto Romano Dr., Miramar Lakes, Florida 33913

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# FAX AUDIT # 44002674153

ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE VI BUSINESS ACTIVITY

The business activity is: Dental office

Date: October 21, 2014

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Business Filings Incorporated, Organizer
Mark Williams, A.V.P.
Authorized Representative
Prepared by Mark Williams, Business Filings Incorporated, 8020 Excelsior Dr., Suite 200, Madison, WI 53717
608-827-5300



FAX AUDIT# 414000 2474153