

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L15000141434
FILED 8:00 AM
August 18, 2015
Sec. Of State
cgolden**

Article I

The name of the Limited Liability Company is:

LAND O LAKES ORAL SURGERY LLC

Article II

The street address of the principal office of the Limited Liability Company is:

449 S 12TH ST
1201
TAMPA, FL. 33602

The mailing address of the Limited Liability Company is:

449 S 12TH ST
1201
TAMPA, FL. 33602

Article III

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

DAVID A LEMAR JR
1759 S KINGS AVE
BRANDON, FL. FL

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.

Registered Agent Signature: DAVID A LEMAR JR

Article IV

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The name and address of person(s) authorized to manage LLC:

Title: MBR
LAND O LAKES ORAL MAXILLOFACIAL AND IMPLAN
449 S 12TH ST #1201
TAMPA, FL. 33602

Signature of member or an authorized representative

Electronic Signature: DAVID A LEMAR JR

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.