

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

L16000154776  
FILED 8:00 AM  
August 18, 2016  
Sec. Of State  
tlhenderson

**Article I**

The name of the Limited Liability Company is:

DENTAL ASSOCIATES OF WINTER HAVEN PRACTICE MANAGEMENT,  
LLC

**Article II**

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

6240 LAKE OSPREY DRIVE  
SARASOTA, FL. 34240

The mailing address of the Limited Liability Company is:

6240 LAKE OSPREY DRIVE  
SARASOTA, FL. 34240

**Article III**

Other provisions, if any:

THE BUSINESS AND AFFAIRS OF THE LIMITED LIABILITY COMPANY  
SHALL BE MANAGED BY ONE OR MORE MANAGERS ELECTED AS  
PROVIDED IN THE OPERATING AGREEMENT OF THE LIMITED  
LIABILITY COMPANY.

**Article IV**

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

DAVID P NICHOLS  
6240 LAKE OSPREY DRIVE  
SARASOTA, FL. 34240

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 P. NICHOLS

Signature of member or an authorized representative

Electronic Signature: DAVID P. NICHOLS

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.