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No. 1 of 1

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FLORIDA LIMITED LIABILITY CO.
Beaches Smiles, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
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**ARTICLES OF ORGANIZATION FOR
BEACHES SMILES, LLC**

ARTICLE I - NAME

The name of the Limited Liability Company is: BEACHES SMILES, LLC

ARTICLE II - ADDRESS

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

150 Professional Drive, Unit #100
Ponte Vedra Beach, FL 32082

ARTICLE III - REGISTERED AGENT & REGISTERED OFFICE

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

James A. Nolan, Esquire
50 North Laura Street, Suite 1100
Jacksonville, FL 32202

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by its Manager, therefore, a Manager managed company. The initial Manager is Shreena Patel, DMD, DS.

By: 

James A. Nolan, Esquire
Authorized Representative of Manager

(In accordance with section 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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**CERTIFICATE OF ACCEPTANCE OF
DESIGNATION OF REGISTERED AGENT OF
BEACHES SMILES, LLC**

Pursuant to Chapter 605, Florida Limited Liability Company Act, James A. Nolan, Esquire, located at 50 North Laura Street, Suite 1100, Jacksonville, Florida, 32202, having been named as registered agent to accept service of process upon BEACHES SMILES, LLC, hereby accepts the appointment as registered agent, agrees to act in that capacity, and agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties as registered agent, acknowledging hereby that it is familiar with and accepts the obligations of its position as registered agent.

IN WITNESS WHEREOF, the undersigned corporation has caused this Certificate to be executed in Jacksonville, Duval County, Florida on this 7th day of March, 2018.

By: _____

James A. Nolan, Esquire
Registered Agent

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