

3/15/2018

13:12 PM

10:15:51

FROM: 0045726629

Page 2

Page 1 of 1

Division of Corporations

L18000065750

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000084109 3)))



H180000841093ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : REZLEGAL, LLC
Account Number : I20140000033
Phone : (904) 567-1177
Fax Number : (904) 567-1066

18 MAR 15 AM 11:08

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: rezlegal@rezlegal.com

FLORIDA LIMITED LIABILITY CO.
Broe Family Dental, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

RECEIVED
2018 MAR 15 PM 4:41
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

MAR 15 2018

S. PRATHER
Help

Electronic Filing Menu Corporate Filing Menu

H18000084109 3

ARTICLES OF ORGANIZATION**OF****BROE FAMILY DENTAL, LLC**

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 Broe Family Dental, 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 and street address of the principal office of the Company shall be 2702 1st Street South, Jacksonville Beach, Florida 32250.

**ARTICLE IV
REGISTERED AGENT AND OFFICE**

The initial registered office of the Company shall be 2702 1st Street South, Jacksonville Beach, Florida 32250, and its initial registered agent at such office shall be Eric T. Broe, D.M.D.

**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.

**ARTICLE VI
OFFICERS OF THE COMPANY**

The Officers of the Company are as follows:

H18000084109 3

03/15/2018 13:12 PM PDT

TO:18506176381 FROM:9045126629

Page: 4

H18000084109 3

Office

Name

President & Secretary

Eric T. Broe, D.M.D.

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

Dated this 13 day of March, 2018.

By:


Eric T. Broe, D.M.D., President

FILED
18 MAR 15 AM 11:08
FBI - NEW YORK

H18000084109 3

H18000084109 3

**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:

Broe Family Dental, 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 Eric T. Broe, D.M.D. as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 2702 1st Street South, Jacksonville Beach, Florida 32250.

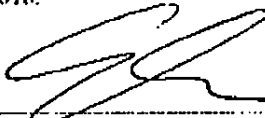
Dated this 13 day of March, 2018.

By: _____


Eric T. Broe, D.M.D., President

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 13 day of March, 2018.


Eric T. Broe, D.M.D., Registered AgentRECEIVED
MAR 15 2018
FLORIDA
SECRETARY OF STATE

18 MAR 15 AM 11:08

FILED

H18000084109 3