

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

L18000077456
FILED 8:00 AM
March 26, 2018
Sec. Of State
mtmoon

Article I

The name of the Limited Liability Company is:

TMJ & SLEEP OF NCF, LLC

Article II

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

717 KRISTINE WAY
THE VILLAGES, FL. 32163

The mailing address of the Limited Liability Company is:

717 KRISTINE WAY
THE VILLAGES, FL. 32163

Article III

Other provisions, if any:

THE PURPOSE IS TO PROVIDE DENTAL SERVICES.

Article IV

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

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL. 33470

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: KATHY SHIN

Article V

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

Title: AMBR
THOMAS W HARTER
5077 COUNTY RD. 161
WILDWOOD, FL. 34785

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Signature of member or an authorized representative

Electronic Signature: PAUL M. SCHMIDT

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.