

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

L19000084730
FILED 8:00 AM
March 27, 2019
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
FLORIDA BLUE WAVE ORTHODONTICS, PLLC

Article II

The street address of the principal office of the Limited Liability Company is:
1773 W FLETCHER AVE
TAMPA, FL. 33612

The mailing address of the Limited Liability Company is:
1773 W FLETCHER AVE
TAMPA, FL. 33612

Article III

Other provisions, if any:
PROVIDE ORTHODONTIC SERVICES TO THE GREATER TAMPA AREA.

Article IV

The name and Florida street address of the registered agent is:
D'ANNE BRUEN
1761 W FLETCHER AVE
TAMPA, FL. 33612

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: D'ANNE BRUEN

Article V

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

Title: MGR
FELDMAN M RANDY DR
1773 W FLETCHER
TAMPA, FL. 33612 UN

Title: MGR
SIERRA J FRANK DR
1773 W FLETCHER AVE
TAMPA, FL. 33612

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Article VI

The effective date for this Limited Liability Company shall be:

04/01/2019

Signature of member or an authorized representative

Electronic Signature: NEELY JORDAN

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.