

9/9/2019



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FLORIDA LIMITED LIABILITY CO.
VIPcare Dental Lutz, LLC

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Electronic Filing Menu

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**ARTICLES OF ORGANIZATION
OF
VIPCARE DENTAL LUTZ, LLC**

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

ARTICLE 1

Name

The name of this limited liability company is:

VIPCARE DENTAL LUTZ, LLC

(hereafter, the "Company").

ARTICLE 2

Effective Date

The Company shall have perpetual existence, commencing on the date that these Articles of Organization are filed with the Florida Department of State.

ARTICLE 3

Mailing Address and Principal Office

The address of the principal office and the mailing address of the Company is 601 S. Harbour Island Blvd., Suite 200, Tampa, Florida 33602.

ARTICLE 4

Initial Registered Office and Agent

The street address of the initial registered office of the Company is 601 Bayshore Boulevard, Suite 700, Tampa, Florida 33606, and the name of the initial registered agent of the Company at that address is David L. Koche.

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ARTICLE 5
Management of the Company

The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The initial manager of the Company shall be:

Ami Pagidipati
601 S. Harbour Island Blvd., Suite 200
Tampa, FL 33602

ARTICLE 6
Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

IN WITNESS WHEREOF, the undersigned authorized representative of a member has executed these Articles of Organization this 9th day of September, 2019.



DAVID L. KOCHÉ
Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE OF
VIPCARE DENTAL LUTZ, LLC**


Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is VIPCARE DENTAL LUTZ, LLC.
2. The name and address of the registered agent and office is:

David L. Koche
601 Bayshore Blvd., Suite 700
Tampa, Florida 33606

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 as provided for in Chapter 605, Florida Statutes.

Dated: September 9, 2019.



DAVID L. KOCHÉ