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.

(((H21000049445 3)))



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 : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.

Account Number: 076666002140 Phone : (727) 461-1818 : (727)441-8617 Fax Number

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

Email Address:

# FLORIDA LIMITED LIABILITY CO. Dental Implants in The Villages, LLC

Certificate of Status Certified Copy 1 Page Count 01 \$155.00 Estimated Charge

850617

(((H21000049445 3)))

#### ARTICLES OF ORGANIZATION

**OF** 

## DENTAL IMPLANTS IN THE VILLAGES, LLC

The undersigned executes these Articles of Organization of DENTAL IMPLANTS IN THE VILLAGES, LLC to form a limited liability company pursuant to the Florida Revised Limited Liability Company Act.

## ARTICLE I. NAME

The name of the limited liability company is Dental Implants in The Villages, LLC.

### ARTICLE II. ADDRESS

The street address of the principal office and the mailing address of the limited liability company is 1271 Patterson Terrace, Lake Mary, Florida 32746.

## ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered agent of the limited liability company is 490 1<sup>st</sup> Avenue South, Suite 700, Saint Petersburg, Florida 33701, and the name of the initial registered agent at that address is Chestnut Business Services, LLC, a Florida limited liability company.

Having been named 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.

CHESTNUT BUSINESS SERVICES, LLC

a Florida limited liability, company

Name: Michael D. Magndson

Title: Vice President

## ARTICLE IV. MANAGEMENT OF COMPANY

The limited liability company is a manager-managed limited liability company. The limited liability company has one (1) initial manager, and this initial manager is Nickelice Brand, D.D.S. at 1271 Patterson Terrace, Lake Mary, Florida 32746.

EXECUTED: February 04, 2021

NICKELICE BRAND, D.D.S.,

Authorized Representative of the Member