01/03

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.

(((H21000147690 3)))



H210001476903ABC/

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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 : (305)675-5944 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. ADRIAN LAB DENTAL LLC

Certificate of Status	i
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Help

02/03

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name and title of each person outhorized	A TOTAL COLUMN	
ARTICLE III - Address: The mailing address and street address of the principal office of the Limited Liability  Gest Fortaine bleau Blyd  Apt 403 Miami Florida 33172.  ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limite: Liability with an active Florida registration.)  Gest Fortaine Registered Agent, You must designate an individual or another business entity  with an active Florida registration.)  Apt 403 Floria Nesseau Blyd  Apt 403 Floria Nesseau Blyd  Adrian Algandro Valdes Hernandes  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)	ARTICLE I - Name:	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability  Gest Fontaine bleau Blyd  Apt 403 Miami Florida 33172.  ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability)  with an active Florida registration.)  Gest Fontaine Registered Agent, You must designate an individual or another business entity  with an active Florida registration.)  Apt 403 Floria New Leau Blyd  Apt 403 Floria New Leau Blyd  Apt 403 Floria New Leau Blyd  Addian Algundro Valdez Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)	The name of the Limited Liability Company is	·
The mailing address and street address of the principal office of the Limited Liability  Company is:  963  FON-Coine bleau Blyd  Apt 403 Mi ami Florida 33172  ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company carnot serve as its own Registered Agent. You must designate an individual or another business entity  With an active Florida registration.)  9031 FONTA; NESLEAU BLYD  Apt 403 Ham: Florida 33/92  Addian Algando Valdes Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)  Advisor Alexandro Valdes florida in the Limited  Advisor Alexandro AMBR)	Adriga Las DENTOL 1/2	
Apt 403 Miami Florida 33172.  ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limite.! Llability with an active Florida registration.)  9031 Fontaine SLEAU BLVD  Apt 403 High Polar SLEAU BLVD  Apt 403 High Voldez Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)	ANALULE II - Address.	
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limite.) Liability with an active Florida registration.)  APT 403 FONTAINE SLEAU BLVD  APT 403 FLAH: V-OPHDA 33/72  ACTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	remorphism of the original control of the	Limited Liability
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limite.) Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  APT 403 FONTAINESLEAU BLVD  APT 403 FIGURE VORTO SAIP ACTION APPT ACTION	9631 Fontainebleau Blud	
Company carnot serve as its own Registered Agent. You must designate an individual or another business entity  With an active Florida registration.)  APT 403 Florida Voldez Hernandez  ARTICLE IV  The name and title of each person authorized to manage and control the Limited  Adrign Alexandro Valdez Hernandez  ARTICLE IV  The name and title of each person authorized to manage and control the Limited  Adrign Alexandro Valdez Hernandez  Adrign Alexandro Valdez Hernandez  ARTICLE IV  The name and title of each person authorized to manage and control the Limited	Apt 403 Miami Florida 3:	3172.
9631 FONTA; NESLEAU BLVD  Apt 403 High Forda 33/92  Addian Algandro Valde Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)  Adrian Alejandro Jales Hernandez  Adrian Alejandro Valde Hernandez	ARTICLE III - Registered Agent, Registered Office: The name and the Florida street add-	
Adrian Alexandro Valdez Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)  Adrian Alexandro Valdez Hernandez  Adrian Alexandro Valdez Hernand		siness entity
Adrian Alexandro Valdez Hernandez  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)  Adrian Alexandro Valdez Hernandez  Adrian Alexandro Valdez Hernand	9631 FONTGINESLEAU BLV	'D
Adrian Algando Valdez Hernandez.  ARTICLE IV The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)  Adrian Algando Valdez Hernandez.	Apt 403 4194: 1-108109 33	3/72
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)  Adrian Alejandro Jaleez Hernandez		
	ARTICLE IV	
	Adrian Alzignoro Jalda	GZ HERNOWSZ
- Name	(AMBR)	1
		-52 

## Required Signatures:

3052201440

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated learnin are true. I am aware that any false information submitted in a document to the Depart nent of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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, F.S..

Registered Agent's Signature (REQUIRED)