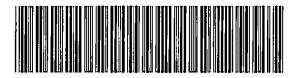
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(Requestor's Name)
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(Document Number)
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DDS Instruments, LLO	C		
			
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		· ·	Amarika Cib
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
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			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
0.		<u></u>	Fictitious Owner Search
Signature			Vehicle Search
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			UCC 11 Search
Name	Date	Time	UCC H Retrieval
Walk-In	Will Pick Up	·	Courier

COVER LETTER

יוט	w Filing Section vision of Corporations				
SUBJECT:	DDS Instruments, LLC				
		Name of L	imited Liabi	lity Company	
The enclose	d Articles of Organization	and fee(s) a	ire submitted	l for filing.	
Please return	all correspondence conce	erning this n	natter to the	following:	
1	Karen Kaplan				
-			Name of	Person	
1	DDS Instruments, LLC				
-			Firm/Co	ompany	
	1800 30th Court North				
-			Addr	ress	
5	St. Petersburg, Florida 337	716			
-		(City/State an	d Zip Code	
ka —	renk@mgeonline.com				
	E-mail address	s; (to be use	d for future a	unnual report notificati	ion)
or further inf	ormation concerning this	natter, pleas	se call:		
К	aren Kaplan	7 at (27	656-7000	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Person		Area Code	Daytime Telephon	
Enclosed is a	check for the following a	mount:			
□\$125.00 F	iling Fec □\$130.00 Certificate	Filing Fee & of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address			Street Address	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 AUG 17 AM 10: 50

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The name of the Limited Liability Company is:

DDS	Instruments.	LLC	
	monutinents,	L-L-\	_

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
11800 30th Court North	11800 30th Court North
St. Petersburg, Florida 33716	St. Petersburg, Florida 33716

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Principal Office Address:

	Name	
11800 30th Court No	orth	
Florida street addres	ss (P.O. Box <u>NOT</u> acc	ceptable)
St. Petersburg	Florida	33716
City	State	Zip

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)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Jeff Blumberg	
	11800 30th Court North	
	St. Petersburg. Florida 33716	
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)