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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561) 686-3307
Fax Number : (561) 290-1590

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

Email Address: bmann@nasonyeager.com

FLORIDA LIMITED LIABILITY CO.
Sage Dental of Avalon Park, PLLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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ALLAHASSEE, FL

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ARTICLES OF ORGANIZATION
OF
SAGE DENTAL OF AVALON PARK, PLLC

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a professional limited liability company under the laws of the State of Florida. The professional limited liability company is being formed for the practice of dentistry and all other activities permitted under applicable law.

ARTICLE I
NAME

The name of this Limited Liability Company is:

SAGE DENTAL OF AVALON PARK, PLLC

ARTICLE II
ADDRESS

The street address and mailing address of the principal office is:

951 Broken Sound Parkway
Suite 250
Boca Raton, Florida 33487

ARTICLE III
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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SECRETARY OF STATE
TALLAHASSEE, FL

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

CCT Corporation System

Stephanie Hencz

Stephanie Hencz, Assistant Secretary

_____, Registered Agent

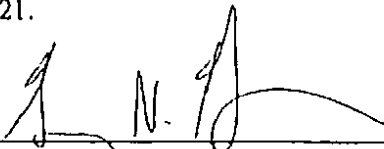
ARTICLE IV
MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority and the business and affairs of the Limited Liability Company shall be managed under the direction of, its Manager(s) and is, therefore, a manager-managed company.

Title: Manager
Sage Dental Group of Florida, PLLC
951 Broken Sound Parkway NW, Suite 250
Boca Raton, FL 33487

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SOUTH FLORIDA
HARRIS, FL

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at Palm Beach Gardens, Florida, for the uses and purposes aforesaid, this 14 day of September, 2021.



Gary N. Gerson, Authorized Representative of the Members