

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L21000526016  
FILED 8:00 AM  
December 15, 2021  
Sec. Of State  
tscott

**Article I**

The name of the Limited Liability Company is:

NXT LVL DENTAL LAB , LLC

**Article II**

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

3560 STUART CT  
FORT MYERS, FL. US 33901

The mailing address of the Limited Liability Company is:

3560 STUART CT  
FORT MYERS, FL. US 33901

**Article III**

Other provisions, if any:

DENTAL LAB PROVIDING CROWNS AND DENTURES

**Article IV**

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

JAY HUIE  
225 E. ROBINSON STREET  
SUITE 570  
ORLANDO, FL. 32801

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.

Registered Agent Signature: JAY HUIE

### **Article V**

The name and address of person(s) authorized to manage LLC:

Title: MGRM  
JEFF GUIDIE  
3560 STUART CT  
FORT MYERS, FL. 33901 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

01/03/2022

Signature of member or an authorized representative

Electronic Signature: TIMOTHY WEBB

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.