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Sage Dental of Fort Myers, PLLC

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ARTICLES OF ORGANIZATION

OF

SAGE DENTAL OF FORT MYERS, 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

The name of this Limited Liability Company is:

SAGE DENTAL OF FORT MYERS, 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 To: +18506176381

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.

CT Corporation System

Assistant Secretary , Registered Agent

ARTICLE IV MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, 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

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 15 day of December, 2021.

Gary N. Gerson, Authorized Representative of the Members