# Division of Corporations Electronic Filing Cover Sheet

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.

(((H220003163183)))



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 : GREEN SCHOENFELD & KYLE LLP

Account Number : I20000000177 Phone : (239)936-7200 Fax Number : (239)936-7997

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

Emai	.1	Add	ress	:				

# FLORIDA LIMITED LIABILITY CO. LEVINE ORTHODONTICS, PLLC

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$155.00		

Electronic Filing Menu

Corporate Filing Menu

Help

Sept. 13. 2022 10:58AM No. 0692 P. 2

### Articles of Organization

<u>of</u>

# Levine Orthodontics, PLLC

### A Florida Professional Limited Liability Company

#### 1. Name

The name of this limited liability company is Levine Orthodontics, PLLC (the "Company"), and it shall be formed as a Florida professional limited liability company under Chapter 605, Florida Statutes and Chapter 621, Florida Statutes, to engage only in the practice of orthodontics.

#### 2. Duration and Purpose

The Company shall exist from the date of filing of these Articles of Organization with the Florida Secretary of State, and the Company's existence shall be perpetual. The Company is organized for the sole purpose of engaging in the practice of orthodontics; and, notwithstanding any other provision hereof, each member of the Company shall be authorized and in good standing to practice orthodontics in the State of Florida.

#### 3. Place of Business

The mailing address of the Company's principal office is P.O. Box 60124, Fort Myers, Florida 33906, and the street address of the Company's principal office is 1380 Royal Palm Square Boulevard, Fort Myers, Florida 33919.

## 4. Registered Agent and Office

The name of the initial registered agent of the Company is GSK Registered Agents, Inc. The street address of the initial registered agent of the Company is 1380 Royal Palm Square Boulevard, Fort Myers, Florida 33919.

### 5. Management of the Company

The Company shall be managed by manager or managers and is, therefore, a manager managed company. Alexander D. Levine, DMD shall serve as the initial manager of the Company.

# 6. Additional Members

Except as otherwise provided in an Operating Agreement adopted for the Company, additional members to the Company may be admitted, but only upon unanimous consent of all members of the Company at the time admission is sought; provided, however, that any additional member shall be authorized and in good standing to practice orthodontics in the State of Florida.

# 7. Operating Agreement

The members shall have the power to adopt, alter, amend, or repeal an Operating Agreement for the Company containing provisions for the regulation and management of the affairs of the Company.

#### 8. Voting

The Company is authorized to issue membership units with voting rights and membership units without voting rights.

#### 9. Certificated Interests

The members' interests in the Company may be evidenced by certificates.

# 10. Transfer of Interest

Except as otherwise provided in an Operating Agreement adopted for the Company, no member shall have the right to transfer any interest in the Company without the unanimous written agreement of all members. If the non-transferring members do not approve the transfer, the transferee of the interest of the transferring member shall have no right to become a member or to participate in the management of the business and the affairs of the Company. The transferee shall be entitled to receive only the share of profits or other compensation by way of income, and the return of contributions to which the transferring member otherwise would be entitled by virtue of membership. Notwithstanding any other provision hereof, any transferee must be licensed, authorized and in good standing to practice orthodontics in the State of Florida.

The undersigned executed these Articles of Organization effective as of September 13, 2022. In accordance with Chapter 605, Florida Statutes and Chapter 621, Florida Statutes, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury the facts stated herein are true.

Kevin A. Kyle, Authorized Representative

00814106.DOCX/1

# Acceptance by Registered Agent

Having been named registered agent and designated to accept service of process for Levine Orthodontics, PLLC, at the place designated herein, and being familiar with the obligations of that position, GSK Registered Agents, Inc., hereby agrees to act in this capacity and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties as registered agent.

GSK Registered Agents, Inc., a Florida

Corporation

By:

Kevin A. Kwe, Vice Presiden

Dated: September 13, 2022

22 SEP 13 PM 12: 35