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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Fit Dentistry, LLC	— <sub>1</sub>
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Thank you Seth Neeley	
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	Art. of Amend. File
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	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
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#### ARTICLES OF ORGANIZATION

#### OF

#### FIT DENTISTRY, LLC

The undersigned hereby certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges and immunities of limited liability companies for profit and hereby adopt the following Articles of Organization for such limited liability company:

### ARTICLE I NAME AND PRINCIPAL OFFICE

The name of this limited liability company is FIT DENTISTRY, LLC, and its principal office and mailing address is located at 15820 Dora Avenue, Suite A, Tavares, FL 32778.

## ARTICLE II DURATION

The existence of this limited liability company shall be perpetual, commencing upon the filing of the Articles of Organization by the Florida Department of State.

#### ARTICLE III PURPOSE

The purpose of this limited liability company is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV MANAGER MANAGED

The limited liability company will be manager managed and the name and address of the manager authorized to manage and control the limited liability company is:

Manager: Timothy J. Pruett of 15820 Dora Avenue, Suite A, Tavares, FL 32778

Manager: Heather Pruett of 15820 Dora Avenue, Suite A, Tavares, FL 32778

## ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this limited liability company shall be located at 15820 Dora Avenue, Suite A, Tavares, FL 32778, and the initial registered agent of the limited liability company at that address shall be Timothy J. Pruett.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization for this limited liability company this  $2^{-1}$  day of November, 2023.

TIMOTHY J. PRUETT

#### **ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

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.

Dated this  $2^{nA}$  day of November, 2023.

TIMOTHY J. PRUETT

15820 Dora Avenuç, Suite A

Tavares, FL 32778'