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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ACOSTA ESTEVEZ PROFESSIONAL SERVICES

Account Number : I20230000138 Phone : (305)592-5240 Fax Number : (305)592-5535

Enter the email address for this business entity to be used for future [33] annual report mailings. Enter only one email address please.

Email Address: acosta estevezacitagmail.com

FLORIDA LIMITED LIABILITY CO. 3DS DENTAL SOLUTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to form a Florida Limited Liability Company pursuant to Chapter 605, Florida Statutes. All information included in the Articles of Organization must be in English and must be typewritten or printed legibly. If this requirement is not met, the document will be returned for correction(s). The Division of Corporations suggests using the sample articles merely as a guideline. Pursuant to s. 605.0201, Florida Statutes, additional information may be contained in the Articles of Organization.

The name of a limited liability company must be distinguishable on the records of the Florida Department of State.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

NOTE: This form for filing Articles of Organization is basic. Each limited liability company is a separate entity and as such has specific goals, needs, and requirements. Additionally, the tax consequences arising from the structure of a limited liability company can be significant. The Division of Corporations recommends that all documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice. The professional advice of your legal counsel to ascertain exact compliance with all statutory requirements is strongly recommended.

Pursuant to s.605.0201, Florida Statutes, the Articles of Organization must set forth the following:

ARTICLE I:

The name of the limited liability company, which must contain the words "Limited Liability Company, "or the abbreviation "L.L.C.," or "LLC."

ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company.

ARTICLE III

The name and Florida street address of the limited liability company's registered agent. The registered agent most sign and state that he/she is familiar with and accepts the obligations of the position. P.O. Boxes are not acceptable.

ARTICLE IV: The name and address of each person authorized to manage and control the Limited Liability Company. Although this information is optional at this time, most financial institutions require this information to be recorded with the Florida Department of State in order to open an account. The Department of Financial Services also requires this information to issue Workers' Compensation.

Use "AMBR" for members who are authorized to manage and control the company. Use "MGR" for managers of manager-managed LLCs.

ARTICLE V: If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 calendar days after the date of filing.

What is an effective date?

You may list an effective date if you would like the limited liability company's existence to become effective on a date other than the date it is filed by this office., The effective date can be up to 5 business days prior to the date of receipt or up to 90 days after the date of receipt.

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The entity's first annual report form will be due January 1st of the calendar year following the year of formation. If a limited liability company is created late in the calendar year and it doesn't expect to commence business until on or after January 1st of the upcoming year, it should add an effective date of January 1 for the coming year.

If the effective date is in the next calendar year, it will delay the requirement to file an annual report until the following calendar year. Example: A limited liability company is formed December 1, 2007. If it added an effective date of January 1, 2008, the first annual report would not be due until January 1, 2009. If a 2008 effective was not listed, the first annual report would be due January 1, 2008.

Signature:

Articles of Organization must be executed by an authorized person, and the execution of the document constitutes an affirmation under the penalties of perjury that the facts stated therein are true.

FILING FEES:

\$ 125.00 Filling Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

\$ 5.00 Certificate of Status (OPTIONAL)

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fees and any optional certificate or copy.

A cover letter containing your name, address and daytime telephone number should be submitted along with the articles of organization and the check. The mailing address and courier address are:

Mailing Address	Street/Courier Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

Any further inquiries concerning this matter should be directed to the New Filing Section by calling (850) 245-6052.

Important Information About the Requirement to File an Annual Report

All Florida Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1" and May 1". The fee for the annual report is \$138.75. After May 1" a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1", go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1".

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COVER LETTER

TO:	New Filing Division of	Section Corporations				
SUBJE	3DS DE	NTAL SOLUTION	NS LLC			
	···	N	ame of Lir	nited Liab	ility Company	
The enc!	osed Anicles	of Organization an	d fee(s) ar	e submitte	ed for filing.	
Please re	turn all corre	spondence concern	ing this ma	atter to the	following:	
	FERNAN	DO SABINA				
				Name o	f Person	
	ACOSTA	ESTEVEZ PROFF	ESIONAI	LSERVIC	ŒS	
				Firm/C	ompany	
	7500 NW	25TH ST, STE 111				
		<u> </u>		Add	ress	
	MIAMI, FI	. 33122				
	acostaesteve	zacct@gmail.com	Ci	ty/State an	d Zip Code	
		E-mail address: (to	be used f	or future a	inaua! report notifica	tion)
For further	information co	oncerning this matte	er, please	cal!;		
	FERNAND		305 at (592 - 5240	
	Nan	ne of Person		a Code	Daytime Telephor	ne Number
Enclosed is	s a check for t	he following amou	nt:			
■\$ 125.00	Filing Fee	□\$130.00 Filing Certificate of St	atus	Certific	i.00 Filing Fee & sal Copy I copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailín	g Address		<u> </u>	Street Address	TACE

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Ff. 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 2024 JAN 23 Fit 1: 2

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	bility Company is:		
3DS DENTAL S	OLUTIONS LLC		
(Musi c	contain the words "Limited	Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal c	office of the Li	mited Liability Company is:
` <u>Prin</u>	cipal Office Address:		Mailing Address:
33 SE 8TH ST			33 SE 8TH ST
APT 612			APT 612
APT 612 BOCA RATON,	•	& Dunistanad	BOCA RATON, FL 33432
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Limbility Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registratio	Registered Ag	BOCA RATON, FL 33432
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Limbility Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	Registered Apn.) agent are:	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registratio	Registered Apn.) agent are: AL GUEVAR	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	Registered Apn.) agent are:	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	Registered Apn.) agent are: AL GUEVAR Name	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or
APT 612 BOCA RATON. ARTICLE III - Registered. (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registration at address of the registered DARISLEY ROSAB	Registered Apn.) agent are: At. GUEVAR Name	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or
APT 612 BOCA RATON. ARTICLE III - Registered.	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered DARISLEY ROSAB	Registered Apn.) agent are: At. GUEVAR Name	BOCA RATON, FL 33432 Agent's Signature: gent. You must designate an individual or

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR DARISLEY ROSABAL GUEVARA 33 SE 8TH ST, APT 612 BOCA RATON, FL 3343 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

DARISLEY ROSABAL GUEVARA Typed or printed name of signce

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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