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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARITZ & COLMAN LLP

Account Number : I2000000130 Phone : (561)864-5100 Fax Number : (561)864-5101

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

Email Address: He dental Raol Com

Foreign Limited Liability Company TLC Dental - Ft. Lauderdale, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$125.00	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION MISCOU, PLORIDA STATOTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. TLC Dental - Ft. Lauderdale)LC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware 3. 03-0576792
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3012 E. Commercial Blvd, Sulte 101, Ft. Lauderdale, FI 33308
(Street Address of Principal Office)
Same
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Steven D. Muckey, Manager
3012 E. Commercial Blvd, Suite 101, Ft. Lauderdale, Fl 33308
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translation must be submitted.)
Men Whiteley
Signature of an authorized person
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)
Steven D. Muckey, Manager
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability Co	ompany is:	
TLC Dental -	- Ft. Lauderdale,LLC		
If unavailable,	the alternate to be used in	n the state of Florida is:	
2. The name a	and the Florida street addr	ess of the registered agent and office are:	***************************************
	Baritz & Colman, LLF		
		(Name)	~
	1075 Broken Sound Parkway NW Suite 102		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		_
	Boca Raton	_FL_33487	
		City/State/Zip	-

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, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TLC DENTAL - FT. LAUDERDALE, LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE FOURTH DAY OF FEBRUARY, A.D. 2014.

5476747 8300

140010610

Jeffrey W. Bullock, Secretary of State
OTHENTY CATION: 1110470

DATE: 02-04-14