2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 20, 2015
Secretary of State
CR2978973223

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Entity Name: TEAM SOLUTIONS DENTAL LLC

Current Principal Place of Business:

100 ALEXANDRIA BLVD
SUITE 24
OVIEDO, FL 32765

Current Mailing Address:

100 ALEXANDRIA BLVD
SUITE 24
OVIEDO, FL 32765 US

FEI Number: 46-3352759

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEFRANCO, JASON M
1054 CRYSTAL BOWL CIRCLE
CASSELBERRY, FL 32707 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JASON M DEFRANCO 01/20/2015

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	DEFRANCO, JASON M
Address	1054 CRYSTAL BOWL CIRCLE
City-State-Zip:	CASSELBERRY FL 32707

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON M DEFRANCO MGR 01/20/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date