

L23000136956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

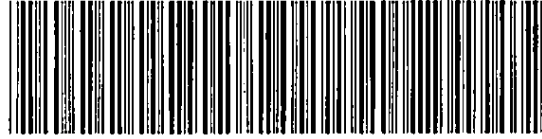
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FALLAHASSEE, FLORIDA

MA

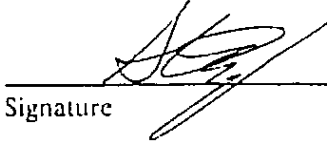
CAPITAL CONNECTION, INC.

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

Highland Smiles, PLLC

Please Debit I20000000257 For: 125

Thank you Seth Neeley



Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ 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 _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

**ARTICLES OF ORGANIZATION FOR
PROFESSIONAL FLORIDA LIMITED LIABILITY COMPANY
HIGHLAND SMILES, PLLC**

ARTICLE I - NAME

The name of the professional limited liability company is **HIGHLAND SMILES, PLLC**.

ARTICLE II - ADDRESS

The mailing address is 2201 2nd Avenue North, St. Petersburg, FL 33713 and the street address of the principal office of the professional limited liability company is 2201 2nd Avenue North, St. Petersburg, FL 33713.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S ACCEPTANCE**

The name and address of the registered agent and office is:

Blalock Walters, P.A.
2 North Tamiami Trail, Suite 400
Sarasota, FL 34236

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated professional limited liability company at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of such duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in Chapters 605 and 621, Florida Statutes.

Blalock Walters, P.A., Florida professional
corporation

By: Matthew Lapointe
Matthew Lapointe, Principal

ARTICLE IV - MANAGEMENT

The professional limited liability company is to be manager-managed. The initial managers are Lilia Sanchez, DMD and Sachell Calderon, DMD. The initial managers' addresses are 2201 2nd Avenue North, St. Petersburg, FL 33713.

ARTICLE V - PURPOSE

The purpose of this professional limited liability company is to provide professional dental services.

These Articles of Organization are executed on this 24th day of March, 2023.

By: Matthew Lapointe
Matthew Lapointe, Authorized Representative