

U250000062352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

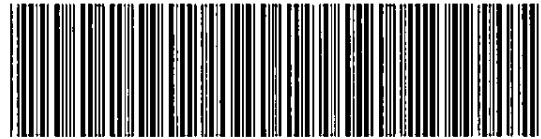
(Business Entity Name)

(Document Number)

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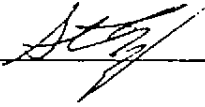
# CAPITAL CONNECTION, INC.

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

BEACHSIDE DENTAL, LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



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 \_\_\_\_\_

Signature

Requested by:

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

**ARTICLES OF ORGANIZATION**

**FOR**

**BEACHSIDE DENTAL, LLC**

**ARTICLE I - NAME**

The name of the limited liability company **BEACHSIDE DENTAL, LLC.**

**ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the company is **2727 S. TAMiami TRAIL, UNIT 2, SARASOTA, FLORIDA 34239.**

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

The name and the Florida street address of the registered agent are:

**CHRIS GARDNER  
2727 S. TAMiami TRAIL, UNIT 2  
SARASOTA, FLORIDA 34239**

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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 the Florida Statutes.

DocuSigned by:  
  
CF307A2E2E9D4A8  
**CHRIS GARDNER**

**ARTICLE IV - MANAGEMENT**

The business and affairs of the limited liability company shall be managed by:

**CHRIS GARDNER  
2727 S. TAMiami TRAIL, UNIT 2  
SARASOTA, FLORIDA 34239**

**SHANNON K. GARDNER  
2727 S. TAMiami TRAIL, UNIT 2  
SARASOTA, FLORIDA 34239**

The members are:

**CHRIS GARDNER**  
2727 S. TAMIAMI TRAIL, UNIT 2  
SARASOTA, FLORIDA 34239

**SHANNON K. GARDNER**  
2727 S. TAMIAMI TRAIL, UNIT 2  
SARASOTA, FLORIDA 34239

**ARTICLE V — LIMITATION ON AGENCY AUTHORITY OF MEMBERS:**

No member of the company shall be an agent of the company solely by virtue of being a member.

Dated: 2/12/2025

DocuSigned by:  
*Chris Gardner*  
CF30782F2F9D4A8  
**CHRIS GARDNER**

Signed by:  
*Shannon K. Gardner*  
00AGAG7367F2448  
**SHANNON K. GARDNER**