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STATE OF ARIZONA OFFICE OF THE CORPORATION COMMISSION ARTICLES OF ORGANIZATION OF NORTHERN ARIZONA ORTHODONTICS, LLC



(An Arizona Limited Liability Company)

Pursuant to A.R.S. 29-632 the undersigned states as follows:

1. The name of the limited liability company is;

NORTHERN ARIZONA ORTHODONTICS, LLC

- 2. The Company shall be formed for the purpose of orthodontic dental services and carrying on any business or activities relating thereto or arising therefrom.
- 3. The address of the registered office in Arizona is;

710 N. Beaver Suite #4 Flagstaff, Arizona 86001

and is located in the County of Coconino, Arizona.

4. The name and address of the statutory agent is:

Robert Caskey, DDS, MSD 710 N. Beaver, Suite 4 Flagstaff, Arizona 86001

- 5. The latest date, if any, on which the limited liability company must dissolve is: January / , 2057.
- 6. Management of the limited liability company is vested in the Managers. The name and address of each person who is a manager is: Robert T. Caskey DDS, MSD 710 N. Beaver Street, Suite 4 Flagstaff, Arizona 86001
- 7. The names and addresses of each person who is a Member are:

Robert Caskey, DDS, MSD Manager/Member 710 N. Beaver, Suite 4 Flagstaff, Arizona 86001 Signed: <u>Anuel Carter</u> Eric Peterson, DDS, MSD, LLC Member 4209 W. Indigo Way Flagstaff, Arizona 86001

1.

Signed: tetu DOS MSD UC 2.9.07

I, Robert Caskey, having been designated to act as Statutory Agent hereby consent to act in that capacity until removed or resignation is submitted in accordance with the Arizona Revised Statutes.

(aster Y: Robert Caskey, Statutory Agent 2-9.07