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File
Division of Corporations
Fax Number : (850) 225-9038

Filer:
Account Name : BUSINESS ELLINGS
Account Number : 10625001300
Phone : (606) 827-4890
Fax Number : (606) 827-4801

LIMITED LIABILITY COMPANY

Paragon (Technology) LLC

Identification Status	00
Identified Copy	1
Page Count	103
Estimated Charge	\$ 85.00

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[Handwritten signature]
3/22/2004

FRANCIS ALBERT 1040005 (7-13, 1955)

**ARTICLE I ORGANIZATION
(OF
Pharmagen Technological LLC)**

ARTICLE II NAME:

The name of the limited liability company shall be Pharmagen Technological LLC.

ARTICLE III PRINCIPAL OFFICE:

The principal place of business and mailing address of the limited liability company shall be 581 55th Street, Miami, Florida 33155.

ARTICLE IV INITIAL REGISTERED OFFICE AND OFFICE ADDRESS:

The name and address of the initial registered office of the Business Filing Incorporated, 622 Election Dr., 5th Fl., Madison, WI 53717.

ARTICLE V INFORMATION:

The duration of the limited liability company shall be 27/3/2004.

ARTICLE VI MANAGERS/MEMBERS:

The management of the limited liability company is reserved for the members and their names and addresses of the members of the limited liability company are:

Andrew Chang, 581 55th St, Miami, FL 33155
Francis Albert, 1040005 (7-13, 1955), Miami Beach, FL 33400

RECORDED & INDEXED
MAY 12 1955
F.P.E.B.

1955 MAY 12 11:21

RECORDED

[Handwritten Signature]
Business Filing Incorporated, Organizer:
Mark Schiff, APT

Authorized Representative
Prepared by Mark Schiff, Business Filing Incorporated, 622 Election Dr., 5th Fl., Madison, WI 53717
(608) 227-560

FRANCIS ALBERT 1040005 (7-13, 1955)

FAX NUMBER: 1-800-368-1773

CERTIFICATE OF DESIGNATION OF REGISTERED AGENTS FOR REGISTERED OFFICES

PURSUANT TO THE PROVISIONS OF SECTION 688.45, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, HEREBY DESIGNATES THE FOLLOWING AS AN AGENT IN DISSENTING TO THE REGISTERED OFFICE REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company (s) Bartragon Technologies LLC

The name and address of the registered agent or office is: Business Filings Incorporated, 5600 East 56th Avenue, Suite 100, Jacksonville, Florida 32207 Located in the County of Duval.

Having been named as registered agent and accept service of process of the above named 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 this statute relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations for my position as registered agent.

Signature: [Handwritten Signature]
Wade H. [Name]
Business Filings Incorporated

Date: August 24, 2004

STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

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