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July 20, 20

CORPORATION NAME (S) AND DOCUMENT APPRO-Pharma, LLC

			6.5
	Filing Evidence □ Plain/Confirmation Copy	Type of Docume Certificate of Star	ent Rich
	☑ Certified Copy	☐ Certificate of God	od Standing
		□ Articles Only	
	Retrieval Request Photocopy Certified Copy	☐ All Charter Docu Articles & Amen ☐ Fictitious Name ©	dments
	NEW FILINGS	AMENDMENTS	· 🔾
	Profit	Amendment	• -
	Non Profit	Resignation of RA Officer/Director	
X	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	

Merger

	OTHER FILINGS
	Annual Reports
	Fictitious Name
	Name Reservation
X	Reinstatement

Other

REGISTRATION/QUALIFICATION
Foreign
Limited Liability
Reinstatement
Trademark
Other

ARTICLES OF ORGANIZATION OF PRO-PHARMA, LLC

SULPHASSEE, FLORIDA

ARTICLE NAME

The name of this Limited Liability Company shall be Pro-Pharma, LLC (the "Company").

ARTICLE II PRINCIPAL PLACE OF BUSÍNESS

The principal place of business of the Company shall be 1500 San Remo Avenue, Suite 125, Coral Gables, FL 33146, and such other place or places as the members from time to time may determine. The mailing address of the Company is 1500 San Remo Avenue, Suite 125, Coral Gables, FL 33146.

ARTICLE III INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial registered agent of the Company shall be Atrium Registered Agents, Inc. The address of the initial registered agent is 1500 San Remo Avenue, Suite 125, Coral Gables, Florida 33146.

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 19th day of July, 2006, effective upon filing same with the Florida Department of State.

PRO-PHARMA

BY:

Dennis Ginsburg, Authorized Representative

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN FLORIDA.

1. The name of the limited liability company is:

PRO-PHARMA, LLC

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

Atrium Registered Agents, Inc. 1500 San Remo Avenue, Suite 125 Coral Gables, Florida 33146

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY 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 ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE DUTIES AND OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

ATRIUM REGISTERED AGENTS, INC.

By:

Dennis-Oinsburg, Vice President

Date: July 19, 2006