## Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H0800000571 3)))



H080000005713ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from the page. Doing so will generate another cover sheet. ing the second control of the second control

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS Account Number: 105256001620

Phone : (608)827-5300 Fax Number : (608)827-5501

## FLORIDA/FOREIGN LIMITED LIABILITY CO

### **HB USA LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

## FAX AUDIT # H0800000571 3

## ARTICLES OF ORGANIZATION OF **HB USA LLC**

ARTICLE I

NAME

The name of the limited liability company shall be: HB USA LLC

PRINCIPAL OFFICE **ARTICLE II** 

The principal place of business and mailing address of this Limited Liability Company shall be: 1922 SW 50th Terrace, Cape Coral, Florida 33914.

### INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE III

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

#### ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2048.

#### MANAGERS/MEMBERS ARTICLE V

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Paul Rodriguez, 1922 SW 50th Terrace, Cape Coral, Florida 33914 FTJ Pharmaceutical Services, Inc., 1922 SW 50th Terrace, Cape Coral, Florida 33914

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: January 2, 2008

WI 53717 (608) 827-5300

### FAX AUDIT # H0800000571 3

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: HB USA LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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 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.

Signature:

Mark Williams, A.V.P. Business Filings Incorporated

Date: January 2, 2008

