

Division of Corporations

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Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
AGELESS REGENERATIVE INSTITUTE, LLC

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Page Count	03
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July 13, 2010

Secretary of State of Florida
Division of Corporations

WRITTEN CONSENT GRANTING APPROVAL FOR USE OF NAME

Ageless Regenerative Institute, Inc., a Florida corporation (the "Corporation"), formed January 20, 2010 under registration number P10000005627 and formally dissolved on May 17, 2010, does hereby grant permission and approves the filing of the Articles of Organization for Ageless Regenerative Institute, LLC and does hereby confirm that both entities are affiliated. The undersigned was the President of the dissolved corporation and is a member of Ageless Regenerative Institute, LLC.

The undersigned, being the President of the dissolved Corporation, has executed this Written Consent Granting Approval for Use of Name as of the 13th day of July, 2010.

AGELESS REGENERATIVE INSTITUTE, INC.

By: Sharon P. McQuillan MD
Name: Sharon P. McQuillan, MD
Title: President

MIA 181,332,407/V1

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**ARTICLES OF ORGANIZATION
OF
AGELESS REGENERATIVE INSTITUTE, LLC**

ARTICLE I - Name

The name of the Limited Liability Company is Ageless Regenerative Institute, LLC (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is 16107 Emerald Estates Drive, Weston, Florida 33331.

ARTICLE III - Management

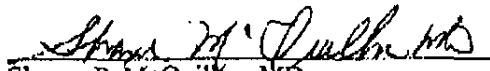
The company shall be managed by its members and is therefore a member-managed company. The initial members are Sharon P. McQuillan, MD and Kristin Comella.

ARTICLE IV - Registered Agent and Office

The street address of the Company's initial registered office is 16107 Emerald Estates Drive, Weston, Florida 33331, and the name of its initial registered agent at such office is Sharon P. McQuillan, MD.

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Dated this 13th day of July, 2010.


Sharon P. McQuillan, MD
Authorized Person

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ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named as Registered Agent and to accept service of process by Ageless Regenerative Institute, LLC at the place designated in these Articles of Organization, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 608.

Dated this 13th day of July, 2010.

By: 
Name: Sharon P. McQuillan, MD

MIA 181,104,320v1 4-28-10

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**Transmittal Cover Sheet****From:**

Debra Palmisano

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To:

Division of Corporations

Fax No:

18506176383

Company:

Florida Department of State

Phone No.:**File No.:** 127633.010100**Re:** Ageless Regenerative Institute, LLC**Date:** 7/20/10 1:43 PM**No. Pages:** Including Cover Sheet 5If you do not receive all pages properly, please call the sender.**Notes:** Attached please find fax audit sheet and corresponding articles of organization for the above entity.

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