

Division of Corporations 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.

(((H13000022235 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FILINGS, INC. Account Number: 072720000101

Phone : (850)385-6735 Fax Number : (954)641-4192

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emmil Address:

FLORIDA LIMITED LIABILITY CO. BIOGENESIS MEDICAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF ORGANIZATION OF BIOGENESIS MEDICAL, LLC

The undersigned as organizer for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the information, rights, privileges and amenities of limited liability companies for profit. It is further declared that the following Articles shall be the charter and authority for the conduct of business of such limited liability company.

ARTICLE I

<u>Section 1.1.</u> The name of the limited liability company shall be BIOGENESIS MEDICAL, LLC.

ARTICLE II PURPOSES AND POWERS

<u>Section 2.1.</u> This limited liability company is organized for the purpose of conducting any and all lawful business for which limited liability companies may be organized under Chapter 608, Florida Statute and this limited liability company shall have all the powers of a limited liability company under Chapter 608, Florida Statute.

ARTICLE III PROFITS AND LOSSES

Section 3.1

A. Sharing of Profits. Members shall be entitled to the net profits arising from the operation of the limited liability company business that remain after the payment of expenses of the limited liability company. Each member shall be entitled to a distributive share of the profits as follows:

DR. AMARYLLIS PASCUAL, PA - 1/3
INSTITUTE OF SPORTS MEDICINE
AND ORTHOPABDICS, PA - 1/3
STEM CELL REGENERATION, INC. - 1/3

The distributive share of the profits shall be determined and paid to the members on the payment dates as determined by the members.

B. <u>Losses</u>. All losses that occur in the operation of the limited liability company business shall be paid out of the capital of the limited liability company and the profits of the business.

ARTICLE IV

Stuart A. Lipson, Esq. Fla. Bar No. 885770 16900 N.B. 13** Avenua N. Miami Besch, FL 33162 (305) 940-2800

H13000022235

LIMITED LIABILITY COMPANY POWERS

Section 4.1. All limited liability powers shall be exercised by or under the authority, and the business and affairs of this limited liability company shall be managed under the direction of the managing members of this limited liability company, pursuant to an operating agreement. This article may be amended from time to time and the regulation of limited liability company by unanimous vote of the members of the limited liability company.

Section 4.2. The power to adopt, alter, amend or repeal the regulations of the limited liability company shall be vested in the members of the limited liability company, pursuant to an operating agreement.

Section 4.3. This limited liability company reserves the right to amend or repeal any provisions contained in these Articles of Organization, or any amendment hereto, and any right conterred upon the members is subject to this reservation.

ARTICLE V DURATION

<u>Section 5.1.</u> This limited liability company shall exist for the maximum duration permitted by Chapter 608, Florida Statute, or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

PRINCIPAL OFFICE/MAILING ADDRESS OF UC

<u>Section 6.1.</u> The principal office and mailing address of the limited liability company shall be located at 18205 Biscayne Blvd., Suite 100, Aventura, FL 33160.

ARTICLE VII MANAGEMENT

Section 7.1. Management of this limited liability company is reserved to its one or more managing members or managers reflected in its operating agreement, whose names and addresses are as follows:

DR. AMARYLLIS PASCUAL, PA MANAGING MEMBER 18205 Biscayne Blvd., Suite 100 Aventura, FL 33160

INSTITUTE OF SPORTS MEDICINE AND ORTHOPAEDICS, PA, MEMBER 20295 NE 29TH Flace, Suite 300 Aventura, FL 33180

STEM CELL REGENERATION, INC., MEMBER

Stuart A. Lipson, Esq. Fla. Bar No. 885770 16900 N.E. 187 Avenue N. Miami Beach, FL 13162 (305) 940-2800

H13000022235

1167 S. Hillsboro Mile, Suite 616F Hillsboro Beach, FL 33062

ARTICLE VIII <u>INITIAL REGISTERED OFFICE AND REGISTERED AGENT</u>

Section 8.1. The address of the initial registered office of the limited liability company is 16900 N.E. 19th Avenue, N. Miami Beach, FL 33162, and the name of the initial registered agent at such address is Stuart A. Lipson, Esquire.

ARTICLE IX RESTRICTION ON MEMBERSHIP

Section 9.1. Members shall have the right to admit new members by unanimous consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company. A member's interest in the limited liability company may not be sold or otherwise transferred except with the written consent of the members.

Section 9.2. Upon death, the retirement, resignation, expulsion, bankruptcy or dissolution of a member, or the occurrence of any other event that terminates the contingent membership of a member in the limited liability company, the remaining members shall have the right to continue the business upon the unanimous consent of such remaining members.

ARTICLE X INDEMNIFICATION

The limited liability company shall indemnify any member, or any former member, to the full extent permitted by law.

The undersigned, being the organizer of the limited liability company, hereby certify that the foregoing constitutes the Articles of Organization of BIOGENESIS MEDICAL, LLC

Executed by the undersigned on this Alphay of January, 2013.

STUART # LIPSON, ESQ Authorized Rep. Of a Member

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this did day of January, 2013, by STUART A. LIPSON, ESQ., who is personally known to me or who produced identification, and who (did) (did not) take an oath.

Notary Public State of Plorida 6

EPNESTO AVILA
NY COMMISSION I EE 205282
EXPIRES: October 0, 2018
Souted The Badel Hotel Services

H13000022235

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE. FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Section 48.091 and Section 608.415, Florida Statutes, the following is submitted in compliance with said Sections:

BIOGENESIS MEDICAL, LLC, desiring to organize under the laws of the State of Florida with its principal office as indicated in the Certificate of Organization, at the City of Aventura, County of Miami-Dade, State of Florida, has named Stuart A. Lipson, Esq., located at 16900 NE 19th Avenue, N. Miami Beach, FL 33162, Miami-Dade County, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGMENT:

Having been named to accept service of process for the abovenamed limited liability company, at the place designated in this Cortificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Sections relative to keeping open said office.

> Stuart A. Lipson, Esq. Registered Agent

Date: January 28, 2013