

L96000000787

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

FILED

96 JUL 26 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL JUL 26 1996

REQUEST TAKEN CONFIRMED APPROVED

DATE 7/26 _____

TIME 9:30 _____ CK No. _____

BY 77 _____

WALK-IN
Will Pick Up _____

RE: CAP of America Laser No. 52504

Applications L.C.

	C.C. FEE.	DISBURSED
☒ Capital Express™ <u>LC</u>		
☐ Art. of Inc. File		
☐ Corp. Record Search		
☐ Ltd. Partnership File		
☐ Foreign Corp. File		
☐ () Cert. Copy(s)		
☐ Art. of Amend. File		
☒ Dissolution/Withdrawal	***346.25	***346.25
☒ C U S. <u>CS</u>		
☐ Fictitious Name File		
☐ Name Reservation		
☐ Annual Report/Reinstatement		
☐ Reg. Agent Service		
☐ Document Filing		
☐ Corporate Kit		
☐ Vehicle Search		
☐ Driving Record		
☐ Document Retrieval		
☐ UCC 1 or 3 File		
☐ UCC 11 Search		
☐ UCC 11 Retrieval		
☐ File No.'s. _____ Copies		
☐ Courier Service		
☐ Shipping/Handling		
☐ Phone () _____		
☐ Top Priority		
☐ Express Mail Prep.		
☐ FAX () _____ pgs.		
SUBTOTALS		

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

**TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY**

Department of State
Division of Corporations
409 E. Gaines Street
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: LAP of America Laser Applications, L.C.
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy of the articles of organization and a check for:

☐ \$285.00
Filing Fee
& Registered
Agent designation

☐ \$293.75
Filing Fee,
Registered Agent
Designation &
Certificate

☐ \$337.50
Filing Fee,
Registered Agent
Designation &
Certified Copy

☒ \$346.25
Filing Fee,
Registered Agent
Designation,
Certified Copy &
Certificate

FROM: Calvin P. Jellema
Name (Printed or typed)

99 West Paces Ferry Road, N.W., Suite 200
Address

Atlanta, Georgia 30305
City, State & Zip

(404) 233-6200
Daytime Telephone Number

NOTE: Please provide the original and one copy of the articles.

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REGISTERED STATE
JUL 26 1996 FLORIDA

**ARTICLES OF ORGANIZATION OF
LAP OF AMERICA LASER APPLICATIONS, L.C.**

ARTICLE ONE

Name

The name of the limited liability company is LAP of America Laser Applications, L.C. (the "Company").

ARTICLE TWO

Address

The mailing address and the street address of the principal office of the Company is 581 Silver Lane, Boca Raton, Florida 33432.

ARTICLE THREE

Duration

The period of duration of the Company shall be perpetual subject to its earlier dissolution.

ARTICLE FOUR

Management

4.1 Management of the business and affairs of the Company shall be vested in one or more managers who shall be elected annually by the members in the manner prescribed by and provided in the Regulations of the Company. The manager or managers shall hold the offices, have the responsibilities, and be subject to the restrictions accorded to them by the members and set out in the Regulations of the Company. Dr. Armin Roeckseisen of Zeppelinstrasse 23, 21337 Lueneburg, Federal Republic of Germany shall serve as the sole manager until the first annual meeting of members or until his successor or successors are elected and qualify.

4.2 No member is an agent of the Company solely by virtue of being a member, and no member has authority to act for the Company solely by virtue of being a member.

ARTICLE FIVE
Admission of Additional Members

The members of the Company shall have the right to admit additional members only upon the unanimous written consent of the members of the Company, given in the manner prescribed by and provided in the Regulations of the Company.

ARTICLE SIX
Members Rights to Continue Business

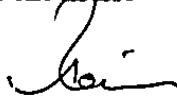
The remaining members of the Company shall have the right exercisable in the manner prescribed by and provided in the Regulations of the Company, to continue the business of the Company upon the death, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member in the Company as set forth in the Regulations of the Company.

ARTICLE SEVEN
Initial Registered Agent

The name and street address of the initial registered agent of the Company is Pieter van Arkel, 581 Silver Lane, Boca Raton 33432, Palm Beach County, Florida.

IN WITNESS WHEREOF, the undersigned executes these Articles of Organization this 23 day of July, 1996.

MEMBER



Dr. Armin Roeckseisen

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

LAP of America Laser Applications, L.C.

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

Pieter van Arkel

(Name)

581 Silver Lane

(P.O. Box or Mail Drop Box NOT Acceptable)

Boca Raton/Florida/33432

(City/State/Zip)

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 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)

(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

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TALLAHASSEE, FLORIDA

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of LAP of
America Laser Applications, L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 0.
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 10,000.
- 5) the total amount of 2, 3 and 4 is \$ 10,000.



23-7-96

Armin Roekseisen

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)