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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES

Account Number : 110450000714

Phone : (850) 222-1173

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AL

LIMITED LIABILITY COMPANY

BIOTAG SCAN ASP, L.L.C.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION**FOR****BIOTAG SCAN ASP, L.L.C.****A Florida Limited Liability Company****ARTICLE I - Name**

The name of the Limited Liability Company is:

Biotag Scan ASP, L.L.C.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

201 S. Biscayne Boulevard
Miami Center, 34th Floor
Miami, Florida 33131**ARTICLE III - Duration**

The period of duration for the Limited Liability Company is:


Perpetual

ARTICLE IV - Management

The Limited Liability Company is a manager-managed company.

ARTICLE V - Initial Registered Agent and Office

The name of the initial registered agent and the Florida street address of the initial registered office is:

CorpDirect Agents
103 North Meridian Street, Lower Level
Tallahassee, Florida 32301
Signature of Milton M. Ferrell, Jr., on behalf of
Ferrell Group Holding Company, L.L.C., MemberRECEIVED
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**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 TO DESIGNATE A REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Biotag Scan ASP, L.L.C.

2. The name and the Florida street address of the registered agent are:

CorpDirect Agents
103 North Meridian Street, Lower Level
Tallahassee, Florida 32301

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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.

By: _____

Cam Wolfe

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