

LO2000022216



ACCOUNT NO. : 072100000032

REFERENCE : 723214 4311863

AUTHORIZATION :

COST LIMIT : \$ 125.00

*Patricia Pigito*

ORDER DATE : August 28, 2002

ORDER TIME : 10:25 AM

ORDER NO. : 723214-005

CUSTOMER NO: 4311863

CUSTOMER: Ms. Ivy Shapiro  
Blank Rome Comisky & Mccauley

One Logan Square, 7th Floor  
18th And Cherry Street  
Philadelphia, PA 19103-6998

RECEIVED  
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FALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: AGELESS ACQUISITION, LLC

EFFECTIVE DATE:

200007393322--6

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

|                 |                              |
|-----------------|------------------------------|
| Name            |                              |
| Availability    |                              |
| Document        | CERTIFIED COPY               |
| Examiner        | <u>XX</u> DCC                |
| Updater         | CERTIFICATE OF GOOD STANDING |
| Updater         | DCC                          |
| Verifier        | DCC                          |
| Acknowledgement | DCC                          |
| W. P. Verifier  | DCC                          |

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS:

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SECRETARY OF STATE  
FALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

Ageless Acquisition, LLC

**ARTICLE II - Address:**

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

Three Ocean Harbor Circle, Ocean Ridge, FL 33435

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Stephen J. Bartkiw

Name

Three Ocean Harbor Circle

Florida street address (P.O. Box NOT acceptable)

Ocean Ridge FL 33435

City, State, and 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 as provided for in Chapter 608, F.S.*

Stephen J. Bartkiw

Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

Stephen J. Bartkiw

Typed or printed name of signer

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE  
FALLAHASSEE, FLORIDA

02 AUG 28 PM 1:57

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