

L0300000 3575

FILED
03 JAN 29 AM 11:11

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA



900011137799

01/29/03--01047--003 **155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

AL

FILED

03 JAN 29 AM 11:03

CLERK OF STATE
TALLAHASSEE, FLORIDA

Dr. George Varughese
5006 Iron wood Trail
Bartow, Florida 33830.

1-27-2003.

Dear Sir,

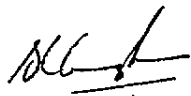
An application with the required fee is being submitted for the registration of Limited Liability Company by the name.

FLORIDA BIOLOGICAL SERVICES L.L.C.
4223 MUSTANG ROAD
LAKELAND. FLORIDA 33801.

Please review the information and do what is needed
The check for the amount of \$ 155 is for

The filing fee
Designation of the registered agent, and for a
Certified copy.

Sincerely and thank you.



Dr. George Varughese.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA BIOLOGICAL SERVICES, L.L.C. STATE
TALLAHASSEE, FLORIDA

03 JAN 29 AM 11:03

ARTICLE II - Address:

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

4223 MUSTANG ROAD, LAKE LAND, FLORIDA. 33801.

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

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

Dr GEORGE VARUGHESSE.

Name

5006 IRONWOOD TRAIL

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

BARTON, FLORIDA, 33830.

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.

GEORGE VARUGHESSE

Registered Agent's Signature

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

BEN JOHN GEORGE

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.)

GEORGE VARUGHESSE

Typed or printed name of signee

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)