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(Requestor's Name)

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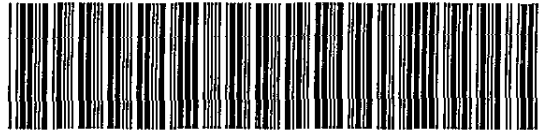
(Business Entity Name)

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**J. DANIEL BREDE**

Professional Association  
Attorney at Law

Suite 201, East Building  
1900 N. W. Corporate Blvd.  
Boca Raton, Florida 33431

Telephone (561) 241-8996

Facsimile (561) 241-7859

October 9, 2003

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: METABOLIC BALANCE PRESS, LLC

Dear Sir/Madam:

Enclosed you will find the Articles of Organization OF METABOLIC BALANCE PRESS, LLC along with the Certificate Designation Place of Business. Also enclosed is this firm's check in the amount of \$155.00 which we understand is the filing fee for this request.

Kindly cause the enclosed Articles to be filed with the Division of Corporations and return a certified copy of the Articles stamped "filed" in the enclosed envelope at your earliest opportunity.

If you have any questions, please contact the undersigned.

Very truly yours,



J. DANIEL BREDE

JDB:jmr  
Enclosures

cc: Mr. William Rasmussen

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ARTICLES OF ORGANIZATION OF METABOLIC BALANCE PRESS LLC  
(A Florida limited liability company)

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is METABOLIC BALANCE PRESS LLC

**ARTICLE II — Address:**

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

1509 Wagner Circle, West Palm Beach, Florida 33406  
(Mailing and Street Addresses are the same)

**ARTICLE III — Registered Agent and Registered Office**

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

WILLIAM W. RASMUSSEN  
1509 Wagner Circle  
West Palm Beach, Florida 33406

**ARTICLE IV — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE V — Management:**  
(Check the appropriate box and complete the statement)

- ☐ The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is as set forth below:

N/A

- ☒ The Limited Liability Company is to be managed by the sole member and the name and address of the sole member is:

WILLIAM W. RASMUSSEN  
1509 Wagner Circle  
West Palm Beach, Florida 33406

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**ARTICLE VI — Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: New members admissible only with unanimous consent of all existing members.

**ARTICLE VII — Members' Rights to Continue Business**

The remaining member(s) of the limited liability company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

IN WITNESS WHEREOF, I have signed these Articles of Organization for METABOLIC BALANCE PRESS LLC and acknowledged them to be my act this 8th day of October, 2003.



Signature of member

(In accordance with Section 608.408(3), Florida Statutes, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

WILLIAM W. RASMUSSEN  
Typed or printed name of signer

Filing Fee: \$125.00 for Articles

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

In pursuance of Chapter 608.415, Florida Statutes, the following is submitted in compliance with said Act:

That METABOLIC BALANCE PRESS LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization, has named WILLIAM W. RASMUSSEN as the person upon whom process may be served at the following address:

1509 Wagner Circle  
West Palm Beach, Florida 33406

**ACKNOWLEDGMENT:**

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.

  
WILLIAM W. RASMUSSEN

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