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GAIL S. ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036

Prone : (407) 843-4600

HE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A

CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

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EIMITED LIABILITY COMPANY

BIOCORD, LLC

Certificate of Status	C and a
Cartified Copy	1
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listimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF BIOCORD, LLC

ARTICLE I - NAME

The name of this limited liability company is BIOCORD, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 103 North Lake Drive, Suite B, Ozmond Beach, Florida 32714.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 103 North Lake Drive, Suite B, Ormond Beach, Florida 32714 and the name of the initial registered agent of the Company at that address is Christian Jenny.

> Signature of a Member or an Authorized Representative of a Member

Christian Jenny

Typed or Printed Name of Signer

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

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