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COVER LETTER

10:	Division of Co			
SUBJ	ECT: Proces	ss Design Science	s, LLC	
00-0			Liability Company)	
The en	nclosed Articles o	f Organization and fee(s) are se	abmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Sheryl A.		Name of Person)	·
	Process [Design Sciences,		
			Firm/Company)	
	2808 NE	33rd Court, Unit	t 203	
			(Address)	
	Ft. Laud	erdale, FL 3330	6	
		(City.	/State and Zip Code)	
For fu	rther information	concerning this matter, please	call:	
Sheryl A. LaVine (Name of Person)		at (954) 734 - 3	3004	
	(Name	e of Person)	(Area Code & Daytime	Telephone Number)
Enclo	sed is a check for	or the following amount:		
□ \$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addre Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:					
Process Design Sciences, LLC		06	2		
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")					
ARTICLE II - Address:					
The mailing address and street address of the pr	incipal office of the Limited Liability Con	mpgny	is:R		
Principal Office Address:	Mailing Address:	_0 _ <u></u>	発品の		
2808 NE 33rd Court, Unit 203	2808 NE 33rd Court, Unit 203	- 0,	ATIONS		
Ft. Lauderdale, FL 33306	Ft. Lauderdale, FL 33306	_	ί'n		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or anoth	ce: ner	•		
The name and the Florida street address of the r	egistered agent are:				
Sheryl A. LaVine					
Name					
2808 NE 33rd Court, Unit 203					
Florida street address (P.O. Box NOT acceptable)					
Ft. Lauderdale	FL 33306				
City, State, a	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Sheryl A. LaVine 2808 NE 33rd Court, Unit 203 Ft. Lauderdale, FL 33306
MGR	Roger J. LaVine, Jr. 2808 NE 33rd Court, Unit 203 Ft. Lauderdale, FL 33306
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date muto or 90 days after the date of filing.)	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	

Signature of 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.)

Sheryl A. LaVine

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)