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Special Instructions to Filing Officer:				
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INC. P.O. Box 37066 (32		Tallahassee, Florida 32303) 222-2666 or (800) 969-1666	5 . Fax (850) 222-1666
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	1406
ARTICLES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	ALL AHA
MENOPAUSE LICENSING J	International LIC 30 3
(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 pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
(lo Richard C. Wolfe, Eg.	- Same
MOLFEL Goldstein PA. 100 SE Second Street, Suite 3300 Miane, 72 33131	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: and Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Richard C. WOLFE	E10.

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..

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

100 SE Sound Street, Suite 3300

City, State, and Zip

Desistered Agent's Signature (REQUIRED)

WOLFE + Gold Perin, P. A.

(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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Manages/ Managing Member	Jeane Lindes 222 5- NEW YORK avenue, 2nd Hool Miani, 71 32789
(Use attachment if necessary)	
•	CONTROLL CONTROLL
	ate of filing: 8/12/06 (OPTIONAL) specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
Signalur (a) a member o	or an authorized representative of a member.
In secondance with section of this document constitue that the facts stated her	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
Richard C. Will Type	Use Quethorized Repnesentative or member dorpfined 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)