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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2006

VERNON A QUARSLEIN PHD PO BOX 3270 WINTER PARK, FL 32790

SUBJECT: HEALTHY JINGLES CORPORATION LILD

Ref. Number: W06000050544

We have received your document for HEALTHY JNGLES CORPORATION LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Please remove "corporation" from the name.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod Document Specialist

Letter Number: 106A00067375

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	[,] is:
Health Hingles Corporation LLXXXXX Healt	hy Jingles Publications LLC
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1358 Richmond Road	PO BOX 3270
Winter Park FL, 32789	Winter Park FL, 32790
The name and the Florida street address of the Name and	PH 1:57 CRETARY UP STATE (P.O. Box NOT acceptable) (P.O. Box NOT acceptable)
Winter Park,	FLORIDA 32789 te, and Zip
City, Sta	te, 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managin The name and address of each Manager of	
The hame and address of each tranager (or ividinaging ivicinoer is as follows.
<u>Title:</u>	Name and Address:
"MGR" = Manager	-
"MGRM" = Managing Member	
MGR	Vernon A. Quarstein Ph.D.
	1358 Richmond Road
	Winter Park FL, 32789
	` au'
	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
7	•
REQUIRED SIGNATURE:	Atrie
Signature of a member or an au	thorized representative of a member.
(In accordance with section 608.4 of this document constitutes an af that the facts stated herein are true	108(3), Florida Statutes, the execution Tirmation under the penalties of perjury
4	·
Meua and Typed or prin	teinj Priscilla A. Hill ned name of signee
The state of the s	······································
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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)