

LO7000013396

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 FEB -5 AM 9:41

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Just

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Bio Security Cooperative of America Marketing Compan

Certificate of Status	0
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RECEIVED

07 FEB -5 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM :

FRK NO. :

Apr. 06 2004 05:09PM P1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

His Society Corporation of America Marketing Company LLC

(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 principal office of the Limited Liability Company is:

Principal Office Address:

3411 Carleto Street

Panama, FL 32303

Mailing Address:

3411 Carleto Street

Panama, FL 32303

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CT Corporation System

Name

1200 South Pine Island Road

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

Panama, Florida 32324

City, State, 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 606, F.S.

CT Corporation System



Registered Agent's Signature (REQUIRED)

Michele Miller
Assistant Secretary

(CONTINUED)

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FLS-1000 CT System Online

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FROM :

FAX NO. 1

APR 05 2004 05:10PM P2

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

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

INDEX

"MICH" = Manager

"MIRM" - Managing Member

Sigurd F. Olson

Name and Address:

3431 Carlotta Street

PERMANENT FILE 325815

Travel Rule

3431 Carlotta Street

Page No. PL 32503

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Susan E. Under

Signature of a member or an authorized representative of a member.

(In accordance with section 606.40(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Susan E. Wesler

Typed or related names of signs

Discussion

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

30.00-Certified Copy (Optional)

\$ 5.00 Certificate of Baking (Optional)

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