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Fax Number : (850)205-0383

From:

Account Name : PETER P LINDLEY, P.A.

Account Number : I20040000095

Phone : (561)210-8604

Fax Number : (561)338-9223

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Biolabz, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
BIOLABZ, LLC**

The undersigned, a duly authorized representative of a member of this limited liability company, adopts these articles of organization to form a limited liability company under Chapter 608, Florida Statutes, the Florida Limited Liability Company Act.

**ARTICLE I. NAME**

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

**ARTICLE II. PRINCIPAL OFFICE**

The principal office and street address of the Company is 3500 Boca Raton Blvd., #710, Boca Raton, FL 33431.

**ARTICLE III. REGISTERED OFFICE AND AGENT**

The address of the initial registered office of the Corporation is 1200 N. Federal Highway, Ste. 200, Boca Raton, FL 33432. The name of the initial registered agent at that address is Peter P. Lindley, P.A.

**ARTICLE IV  
INDEMNIFICATION**

Each person who is or was a member, manager, officer, employee, or agent of the Company, and each such person who is or was serving at the request of the Company as a member, manager, director, officer, employee, or agent of another limited liability company, corporation or of a partnership, joint venture, trust or other enterprise, including service with respect to employee benefit plans maintained or sponsored by the Company (including the heirs, executors, administrators or estate of such person), shall be indemnified by the Company to the fullest extent permitted from time to time by the laws of the State of Florida or any other applicable laws as presently or hereafter in effect. The Company shall advance the expenses incurred by any of the foregoing persons in defending actions against them to the full extent permitted by applicable law. Without limiting the generality or the effect of the foregoing, the Company may enter into one or more agreements with any person which provide for indemnification greater or different than that provided by this Article IV. Any amendment, modification or repeal of this Article IV shall not adversely affect any right or protection existing hereunder at the time of such amendment, modification or repeal.

**ARTICLE XI. AUTHORIZED REPRESENTATIVE**

The name and address of the person signing these articles of organization as authorized representative are:


Peter P. Lindley  
1200 N. Federal Hwy., Ste. 200  
Boca Raton, FL 33432

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IN WITNESS WHEREOF, the undersigned does hereby execute these Articles of Organization and does hereby acknowledge that this instrument constitutes his act and deed and that the facts stated herein are true.

  
Peter P. Lindley

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**CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT**

Having been named as registered agent to accept service of process for **BIOLABZ, LLC** at the place designated in the articles of organization for said limited liability company, the undersigned hereby accepts appointment as registered agent, has read and is familiar with the applicable provisions of Chapter 608, F.S. concerning the duties of the registered agent, and agrees to act in this capacity.

**PETER P. LINDLEY, P.A.**By: 

Peter P. Lindley, Esq.

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