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FLORIDA/FOREIGN LIMITED LIABILITY CO.

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EXAMINER

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FAX AUDIT # 409000751663

ARTICLES OF ORGANIZATION OF BIOMATURAL LLC

ARTICLE I

NAME

The name of the limited liability company shall be: BIOMATURAL LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 6408 E Fowler Ave., Temple Terrace, Florida 33617.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Jack Townsend, 6408 E. Fowler Ave., Temple Terrace, Florida 33617. Located in the County of Hillsborough.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Jack Townsend, 6408 E Fowler Avc., Temple Terrace, Florida 33617 Helen Townsend, 6408 E. Fowler Ave, Temple Terrace, Florida 33617

9 MAR 31 AM 8:

Date: March 19, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

Nahll

(608) 827-5300

FAX AUDIT # 409000 5/663

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: BIOMATURAL LLC

The name and address of the registered agent and office is Jack Townsend, 6408 E. Fowler Ave., Temple Terrace, Florida 33617. Located in the County of Hillsborough.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature

Jack Townsand

Date:

SECRETARY OF STATE OF CORPORATIONS