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(City/State/Zip/Phone #)

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(Document Number)

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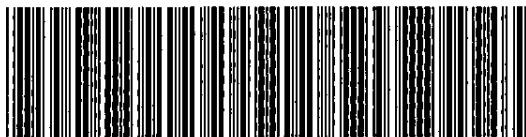
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 DEC 14 PM 2:19

DAVID A. HESSION
10310 N.W. 60th Avenue
Ocala, Florida 34482

December 9, 2009

To: Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301


Re: Chondropower LLC

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Cesar R. Nieves
Chondropower LLC
5640 SW 6th Place
Suite 500
Ocala, FL 34474
C.NIEVES@IMMUVET.COM

For further information concerning this matter, please call:
David A. Hession at (352)804-0941

Enclosed is a check for the following amount: \$160.00 for the filing fee, a Certificate of Status and a Certified Copy.

Sincerely,

David A. Hession
352-804-0941
HESSIONDAVID@AOL.COM

**ARTICLES OF ORGANIZATION
FOR
Chondropower LLC**

ARTICLE I- Name:

The name of the Limited Liability Company is:

Chondropower LLC

ARTICLE II- Address:

The mailing address and street address of the principle office of the Limited Liability Company is:

Principal Office Address:

5640 SW 6th Place
Suite 500
Ocala, FL 34474

Mailing Address:

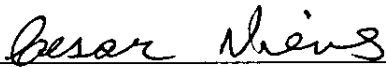
5640 SW 6th Place
Suite 500
Ocala, FL 34474

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

CESAR R. NIEVES

5640 SW 6th Place
Suite 500
Ocala, FL 34474

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.



Registered Agent's Signature

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DIVISION OF CORPORATION
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ARTICLE IV- Managing Member:

The name and address of the Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

**CESAR R. NIEVES
5640 SW 6th Place
Suite 500
Ocala, FL 34474**



CESAR R. NIEVES

(In accordance with section 608,408 (3), Florida statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CESAR R. NIEVES

Typed or printed name of signee