

L 100000039050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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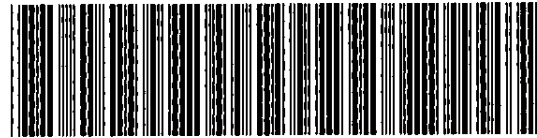
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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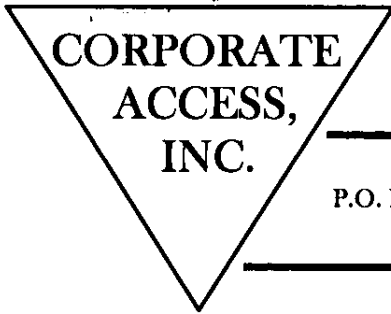
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B. KOHR

APR 12 2010

EXAMINER



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125-D

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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LLC

1.

Clinical Research Trials, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF ORGANIZATION
OF
CLINICAL RESEARCH TRIALS, LLC

The undersigned, being duly authorized to organize this Limited Liability Company, hereby makes, acknowledges and files these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Limited Liability Company is:

CLINICAL RESEARCH TRIALS, LLC

ARTICLE II
ADDRESS

The street address and mailing address of the principal office is:

2000 N. Bayshore Dr., Apt. 210
Miami, FL 33137

ARTICLE III
DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV
MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of, its Managers. The Limited Liability Company is, therefore, a manager-managed company. The name and mailing address of the initial Managers are:

Aparna Rajadhyaksha
2000 N. Bayshore Dr., Apt. 210
Miami, FL 33137

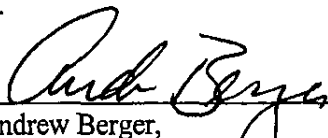
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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS

Isbet Sosa
765 E. 9th St.
Hialeah, FL 33010

ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at Fort Lauderdale, Florida, for the uses and purposes aforesaid, this ____ day of April, 2010.



Andrew Berger,
Authorized Representative of the Members

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

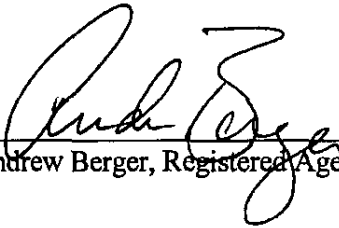
1. The name of the Limited Liability Company is:

Clinical Research Trials, LLC

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

Andrew Berger, Esq.
Becker & Poliakoff, P.A.
3111 Stirling Road
Fort Lauderdale, Florida 33312

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.



Andrew Berger, Registered Agent