

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000230355 3)))



H100002303563APCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MORAN, KIDD, LYONE, JOHNSON & BERKSON, P.A.

Account Number : I20000000003 Phone : (407)841-4141 Fax Number : (407)841-4148

*Enter the email address for this business entity to be used for future constant report mailings. Enter only one email address please.**

FLORIDA LIMITED LIABILITY CO. NEOFAT INDIA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2010 OCT 21 AM 8: 25

J. SAULSBERRY EXAMINER

OCT 22 2010

Electronic Filing Menu

Corporate Filing Menu

Help

(((H10000230355 3)))

ARTICLES OF ORGANIZATION OF NEOFAT INDIA, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I

Name. The name of the limited liability company shall be NEOFAT INDIA, LLC ("Company").

ARTICLE II

Address. The mailing address and street address of the principal office of the Company shall be 8763 Pisa Drive, Suite 5212, Orlando, Florida 32819.

ARTICLE III

<u>Duration</u>. The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in the operating agreement of the Company.

ARTICLE IV

Initial Registered Office and Agent. The street address of the initial registered office of the Company is 8763 Pisa Drive, Suite 5212, Orlando, Florida 32819 and the name of the initial registered agent of the Company at that address is GUS PAPATHANASOPOULOS.

ARTICLE V

Management. The Company shall be managed by a manager or managers in accordance with an operating agreement adopted by the members for the management of the business and affairs of the Company. The operating agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The names and addresses of the initial managers of the Company are:

NAME

ADDRESS

NeoFat Industries, Inc.

8763 Pisa Drive, Suite 5212 Orlando, Florida 32810

Cf 10/13/2010

(((H10000230355 3)))

2010 UCT 21 AM 8: 25

((H10000230355 3)))

A . Ka

Gus Papathanasopoulos

8763 Pisa Drive, Suite 5212 Orlando, Florida 32810

IN WITNESS WHEREOF, the undersigned does set his hand and seal and has acknowledged and filed the foregoing Articles of Organization under the laws of the State of Florida this 13 H day of October, 2010

Gus Papatkanasepoulos Authorized Representative

STATE OF FLORIDA COUNTY OF ORANGE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared GUS PAPATHANASOPOULOS, to me personally known to be the person described in and who executed the foregoing Articles of Organization and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this day of October, 2010.

NOTARY PUBLIC

TRISHA MARSHALL

Notary Public - State of Florida

My Commission Expires Mar 4, 2011

Commission # DD 632775

Bonded Through National Notary Assn.

2010 OCT 21 AM 8: 25

(((H10000230355 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

NEOFAT INDIA, LLC

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED SUBMITS THE FOLLOWING STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT IN THE STATE OF FLORIDA:

- 1. The name of the limited liability company is NEOFAT INDIA, LLC
- As designated in the Articles of Organization filed with this certificate, the name and the Florida street address of the registered agent is:

GUS PAPATHANASOPOULOS 8763 Pisa Drive, Suite 5212 Orlando, Florida 32810

3. The street address of the registered office and the street address of the business office of the registered agent are identical.

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.

GUS PAPATYANASOPOULOS

October 1342010