# #1/000/324/3

(Re	questor's Name)	
(Ad	dress)	
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EXAMINER DEC 3 0 2010

# **COVER LETTER**

Division of Corporations	
SUBJECT: Armor Diagnostics, LLC	
Name of Limited Liability Company	!
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Arnold Morse	
Name of Person	·
Armor Diagnostics, LLC	_
Firm/Company	
181 North Country Club Road	
Address	
Lake Mary, Florida 32746	
City/State and Zip Code	45 17 14 18 18 18 18 18 18 18 18 18 18 18 18 18
arnietfmdxraycoo@aol.com	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please call:	
Arnold Morse at (407)	921-7600
Name of Person Area Code &	Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ Certificate of Status \$155.00 Filing Certified Copy (additional copy is	Certificate of Status &
Registration Section Registration Division of Corporations Division of P.O. Box 6327 Clifton Buil	Corporations Iding tive Center Circle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	:
Armor Diagnostics, LLC	

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

# ARTICLE II - Address:

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

Principal Office Address:	<b>Mailing Address:</b>	
181 North Country Club Road	181 North Country Club Roa	ad
Lake Mary, Florida 32746	Lake Mary, Florida 32746	
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	n Registered Agent. You must designate an indiv	vidual or another
Arnold Morse		10 DEC
1	Name	FIL C 29
181 North Coเ	untry Club Road	
Florida stro	eet address (P.O. Box <u>NOT</u> acceptable)	FIG. S. S.
Lake Mary,	<sub>FL</sub> 32746	): 39
	ity State and Zin	E M

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 (REQUIRED)

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

h Country Club Road ry, Florida 32746
ry, Florida 32746
•
: January 1, 2011 (OPTIO
d cannot be more than five business (

Signature of a member or an authorized representative of a member.

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ArnoLD Morse Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)