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**EXAMINER** 



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## **COVER LETTER**

TO:

Registration Section

Division of Corporations	
SUBJECT: Velocity Laboratories	s, LLC
Name of Limit	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
John K. Neubert, D.D.S	S Ph D
John N. Nedbert, D.D.C	Name of Person
Velocity Laboratories, L	LC
	Firm/Company
8426 S.W. 14th Lane	
	Address
Gainesville, FL 32607	
•	y/State and Zip Code
velocity.laboratories@gmail.c	for future annual report notification)
	•
For further information concerning this matter, please	e cail:
John Neubert	at (352 ) 262-5290
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	r is:	
Velocity Laboratories, LL0	Э.	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
8426 S.W. 14th Lane	8426 S.W. 14th Lane	
Gainesville, FL 32607	Gainesville, FL 32607	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	red Office, & Registered Agent's egistered Agent. You must designate an individ	Signature: lual or another
The name and the Florida street address of the	ne registered agent are:	
John Neubert		IT JUL 27
Na	me	
8426 S.W. 14	th Lane	
Florida street	address (P.O. Box NOT acceptable)	
Gainesville	<sub>FL</sub> 32607	AMII:5
City	, State, and Zip	

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..

(CONTINUED)

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

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

/GR	Richard Mills
	1614 East Illinois Street Wheaton, IL 60187
MGRM	John Neubert
MORIVI	8426 S.W. 14th Lane
	Gainesville, FL 32607
MGRM	Robert Caudle
	5121 S.W. 82nd Terrace
	Gainesville, FL 32608
Use attachment if necessary)	
	n the date of filing: (OPTION. ust be specific and cannot be more than five business da

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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.)

John K. Neubert, D.D.S., Ph.D.

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)