

09/16/2011

3:47 SHUMAKER LOOP &amp; KENDRICK

(813) 229-1660

P.000005

# L1100016481

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.

(((H11000225909 3)))



H110002259093ABC\$

**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 : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

9/16/2011

RESENDING FAX SENT ON  
WEDNESDAY. PROOF OF  
DELIVERY ATTACHED.

REQUESTING ORIGINAL  
FILE DATE OF 09/14/2011.

THANK YOU.

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

Email Address: pcampbell@slk-law.com

## FLORIDA LIMITED LIABILITY CO. AUXILIUM SERVICES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED  
11 SEP 16 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
2011 SEP 14 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

SEP 19 2011

Electronic Filing Menu

Corporate Filing Menu

Help EXAMINER

9/14/2011

H11000225909 3

**Articles of Organization  
Of  
Auxilium Services, LLC**

**ARTICLE I – Name:**

The name of the limited liability company is Auxilium Services, LLC.

**ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company are as follows:

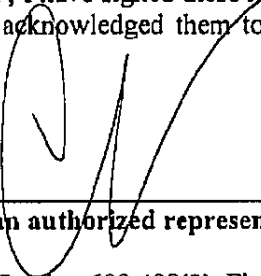
Principal Office Address:  
101 E. Kennedy Boulevard  
Suite 2800  
Tampa, Florida 33602

Mailing Address:  
P.O. Box 18161  
Tampa, Florida 33679-8161

**ARTICLE III – Management:**

The limited liability company is to be managed by a manager or managers.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this <sup>13<sup>th</sup></sup> day of September, 2011.

  
\_\_\_\_\_  
**Signature of 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.)

C. Philip Campbell, Jr., Esq.  
**Typed or printed name of signee**

2011 SEP 14 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

H11000225909 3

H11000225909 3

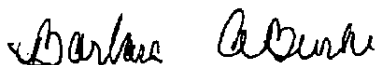
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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 **Auxillum Services, LLC.**
2. The name and the Florida street address of the registered agent are:

CT Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

*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.*



Registered Agent

Barbara A. Burke  
Special Assistant Secretary

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 SEP 14 AM 8:31

FILED

H11000225909 3

09/16/2011 13:48 SHUMAKER LOOP & KENDRICK

(FAX)813 229 1660

P.004/005

Banatte, Carline R.

From: faxadmin@slk-law.com  
Sent: Wednesday, September 14, 2011 4:41 PM  
To: Banatte, Carline R.  
Subject: TASKalfa 420i Job end report mail  
  
Attachments: 000266.pdf



000266.pdf (28  
KB)

Job No.: 000266  
Result: OK  
End Time: Wed 14 Sep 2011 16:41:06  
File Name: AUXILIUM SERVICES\_efilcovr.pdf  
Category: Sending Jobs

Result	Job Type	Address
OK	FAX	*2331*000001*918506176383

TASKalfa 420i  
[00:c0:ee:7a:8e:59]

FILED

2011 SEP 14 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA