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SECNETABLE FLORIDA

COVER LETTER

TO: Registratio Division of	n Section Corporations		
_{subject:} Mer	yl Brandwein Nu	itrition	
		ed Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
Mervi E	Brandwein		
		Name of Person	
Meryl E	Brandwein Nutrit	ion, LLC	
		Firm/Company	_
916 G	ulfstream Ct.		
		Address	
Weston, F	FI 33327		
		y/State and Zip Code	—
meryl@m	nerylb.com	or future annual report notification)	
	,	,	
For further information	on concerning this matter, please	e call:	
Meryl Brandwein		at (954) 727-9006	
Nar	ne of Person	Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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	

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
Meryl Brandwein Nutrition, LLC				
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
916 Gulfstream Ct	916 Gulfstream Ct			

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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

Meryl Brandwein

business entity with an active Florida registration.)

Weston, FL 33327

Name

916 Gulfstream Ct.

Florida street address (P.O. Box NOT acceptable)

Weston, FL 33327

Weston, FL 33327

FL

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: October 17, 2011 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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 trues. 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.) Meryl Brandwein 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)