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Certified Copies	Certificates	of Status
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SECRETARY OF STAFF

COVER LETTER

TO: Registration Section Division of Corporati	ons	·	্ থ
SUBJECT: Bioponics	Technologies	i. LLC	12 HAR 26
SORTECI: Ticketing		ed Liability Company	
			`σ΄
The enclosed Articles of Organi	ization and fee(s) are	submitted for filing.	-
Please return all correspondence	e concerning this matt	er to the following:	
Ernest Papad	oyianis		
		Name of Person	
Bioponics Tec	hnologies, LL	<u>·</u> C	
	<u></u>	Firm/Company	
21218 St. And	rews Blvd., #7	' 38	
		Address	
Boca Raton, FL	33433		
		y/State and Zip Code	
greentec@bellsou			
E-m	ail address: (to be used f	or future annual report notification)	
For further information concern	ing this matter, please	F 767 94 9 3 8 71	
Ernest Papadoyianis		at (561 482-6408	r.
Name of Person	n	Area Code & Daytime Tele	phone Number
Enclosed is a check for the fo	ollowing amount:		
	.00 Filing Fee & tificate 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)
Regi Divi P.O. Talla	ing Address stration Section sion of Corporations Box 6327 shassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	Tircle
Autor British Was	edd c		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bioponics Technologies, 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:	Mailing Address:
21218 St. Andrews Blvd., #738	21218 St. Andrews Blvd., #738
Boca Raton, FL 33433	Boca Raton, FL 33433

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 business entity with an active Florida registration.)

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

Ernest Papadoyianis
Name

21218 St. Andrews Blvd., #738

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

Boca Raton

FL 33433

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 (REOUIRED)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Ernest Papadoyianis
	2401 NW 40 Circle
	Boca Raton, FL 33431
·	
	date of filing: (OPTIONAL
CLE V: Effective date, if other than the	date of filing: (OPTIONAL) de specific and cannot be more than five business days
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	Respecific and cannot be more than five business days
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