

L12000127323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

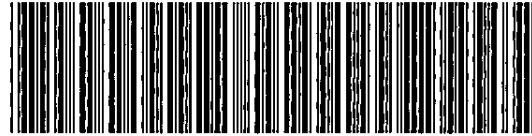
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

OCT - 5 2012

EXAMINER



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10/04/12--01020--009 **160.00

FILED
12 OCT -4 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SDK NATURAL PRODUCTS LLC
2332 GALIANO STREET
2nd Floor
Coral Gables
FL 33134

October, 1st 2012

FLORIDA DEPARTMENT OF STATE
Registration Section
Clifton Building
2661 Executive Center Circle
THALLAHASSEE
FL 32301

Dear Sir or Madam,

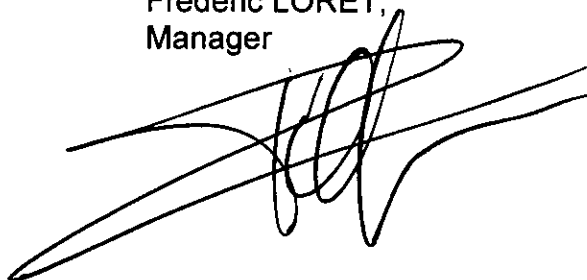
Please find enclosed all documents you have asked for the registration of our new Limited Liability Company:

- Articles of organization for Florida Limited Liability Company
- Cover letter
- 1 check of US \$ 160 for filling fees.

Wishing you good reception

Best regards

Frederic LORET,
Manager

A handwritten signature in black ink, appearing to be 'Frederic LORET', written over a horizontal line.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SDK NATURAL PRODUCTS 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:

2332 Galiano Street, 2nd Floor
Coral Gables
FL 33134

Mailing Address:

2332 Galiano Street, 2nd Floor
Coral Gables
FL 33134

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:

Frederic LORET

Name

2332 Galiano Street, 2nd Floor

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

Coral Gables FL 33134

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)

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

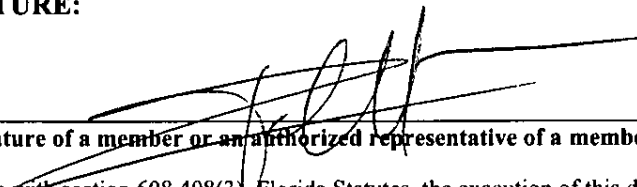
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Frederic LORET
_____	2332 Galiano Street, 2nd Floor
_____	Coral Gables FL 33134
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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 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.)

Frederic LORET

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)