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B. BOSTICK

JAN 3 0 2013

EXAMINER

(850) 245-6051.

COVER LETTER

TO: Registration 8 Division of Co		••		
SUBJECT: LABO		DRGANIC RESEARCH ed Liability Company	avo <u>Dev</u> 64	pement, LLC.
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matt	er to the following:		
RICHAR.	D. PIFER JR	Name of Person		
LABOLATI	DRIGS OF DRGAI	VIC RESCARCH QUO Firm/Company	Developener	15, LLC.
5163	HIGHTOWER RO			
NORTH	PORT, Fl. 3	4288		
DIFER. 1	City TICHARD ON UAHE	4288 y/State and Zip Code oo . Com or future annual report notification)	SELA ALLA	<u></u>
	E-mail address: (to be used f	or future annual report notification)	NS.	AN 71 28
For further information	concerning this matter, please	call:	Ω±7	<u> </u>
RICHARD	PiFer	at (941) 916-5 Area Code & Daytime Telep	ohone Number	
Name	of Person	Area Code & Daytime Telep	ohone Number	29
Enclosed is a check f	or the following amount:			
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee Certificate of State Certified Copy (additional copy is end	ıs &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

				•
LABORATORIES.	of Organic	Research and	Developement	; LLC,
(Mus	t end with the words "Lin	nited Liability Company, "I	.,L.C.," or "LLC.")	
ARTICLE II - Add The mailing address	·	of the principal offic	e of the Limited Liabili	ity Company is:
Principal Office A	ddress:	Mailing A	ddress:	

ARTICLE I - Name:

The name of the Limited Liability Company is:

5163 HILHTOWER Rd.	5163 HIGHTOWER Rd.
NORTH PORT, Fl. 34288	NORTH PORT, Fl. 34288

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:

RICHAED D. PIRE JR.

Name

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

NORTH PORT

FL 34288

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	RICHARD D. PIFER TR 5163 HIGHTOWER Rd NORTH PORT, FI. 34286
<u></u>	
(Use attachment if necessary)	
ICLE V: Effective date, if other than n effective date is listed, the date mr to or 90 days after the date of filing	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business (3.)
REQUIRED SIGNATURE:	13 JAN BEURELA TALLAHA
Signature of a men	MAN 28 AN 28 mber or an authorized representative of a member.
(In accordance with section constitutes an affirmation ur I am aware that any false inf constitutes a third degree fel	608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Stormation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
RICHARD	D. P. FER JR. 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)