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Division of Corporations

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Florida Department of State
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FLORIDA LIMITED LIABILITY CO.
 THE AMERICAN INSTITUTE OF PSOROLOGY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
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**ARTICLES OF ORGANIZATION
OF
THE AMERICAN INSTITUTE OF PSOROLOGY, LLC**

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TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is: **The American Institute of Psorology, LLC.**

ARTICLE II - DURATION

The Limited Liability Company shall have perpetual existence commencing on the date of filing.

ARTICLE III - PURPOSE

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States or the State of Florida or under the laws of any other State or country in the world.

ARTICLE IV - INITIAL REGISTERED AGENT

The name and address of the initial registered agent of this Limited Liability Company is: Kirk D. De Leon, Esq., 66 W. Flagler Street, Suite 800, Miami, Florida 33130.

ARTICLE V - PRINCIPAL OFFICE OF THE COMPANY

The principal office of this Limited Liability Company shall be 667 NW 29th Street, Miami, Florida 33127.

The mailing address shall be 667 NW 29th Street, Miami, Florida 33127.

ARTICLE VI - MEMBERS

The Members of this Limited Liability Company are as follows: (**may not be needed**)

Member Name: Lift Laboratories Inc.
c/o David Weck, President
667 NW 29th Street

Miami, Florida 33127

ARTICLE VII - MANAGEMENT

The Limited Liability Company is to be Managed by one or more of its members and is therefore a member-managed company.

The Initial Managing Member of the Limited Liability Company is:

Managing Member: David Weck, President
Lift Laboratories, Inc.
667 NW 29th Street
Miami, Florida 33127

ARTICLE VIII - OPERATING AGREEMENT

The Initial Operating Agreement of this Limited Liability Company shall be adopted by the initial Member.

ARTICLE IX - INDEMNIFICATION

The Limited Liability Company shall indemnify and defend any Member or Manager or any former Member or Manager to the full extent permitted by law.

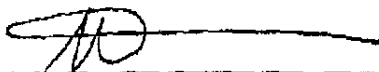
ARTICLES X - AMENDMENT

This Limited Liability Company reserves the right to amend or repeal any provisions contained in these Articles of Organization, in accordance with the provisions of the Florida Statutes.

IN WITNESS WHEREOF, and in accordance with §605.0203(1) (b), 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 §817.155 Florida Statutes.

Dated this 30 day of January 2014.


Kirk D. De Leon, Esq.

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

BEFORE ME, the undersigned authority, personally appeared **Kirk D. De Leon**, who is personally known to me or who has provided a Florida Drivers license as identification to verify identity, and he/she subscribed the above Articles of Organization and he/she did freely and voluntarily acknowledge before me according to the law that he/she made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Miami-Dade County, Florida, this 30 day of January, 2014.

My Commission Expires:
(Seal)



JENNIFER COLINA
MY COMMISSION # FF 056811
EXPIRES: October 30, 2017
Board of Trust, Budget & Agency Services


Notary Public of the State
of Florida at Large

H14000025400

Certificate of Designation Registered Agent/Registered Office

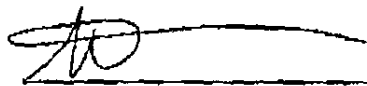
PURSUANT TO THE PROVISIONS OF CHAPTER 605 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: The American Institute of Psorology, LLC.
2. The name and address of the registered agent and office is:

Kirk D. De Leon, Esq.
66 W. Flagler Street
Suite 800
Miami, Florida 33130

Having been named as registered 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 605, F.S.

Dated this 30 day of January 2014.


Kirk D. De Leon

This instrument prepared by:
Kirk D. De Leon, Esq.
66 West Flagler Street
Suite 800
Miami, Florida 33130
(305) 374-5494
(305) 374-5495 fax
Florida Bar No.: 989959

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