

L15000042562

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000059458 3)))



H150000594583ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : GM FINANCIAL GROUP
Account Number : I19980000102
Phone : (954) 428-8899
Fax Number : (954) 428-6699

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.
Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
TEXAS COMPOUNDING FAMILY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

MAR 10 2015
Help J. BRUCE

H15000059458 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TEXAS COMPOUNDING FAMILY, 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:13378 SW 21 STREET13378 SW 21 STREETMIRAMAR, FL 33027MIRAMAR, FL 33027

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:

DANIEL BAEZ

Name

13378 SW 21 STREETFlorida street address (P.O. Box NOT acceptable)MIRAMAR

City

FL 33027

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 605, F.S.


 Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

 FILED
 2015 MAR -9 AM 11:32
 SECRETARY OF STATE
 PALM BEACH, FLORIDA

H15000059458 3

H150000594SR 3

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

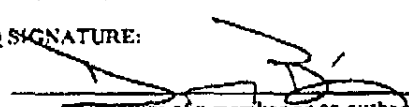
<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>MGRM</u>	<u>DANIEL BAEZ</u> <u>13378 SW 21 STREET</u> <u>MIRAMAR, FL 33027</u>
<u>MGRM</u>	<u>EMMALIE SILVESTER</u> <u>13378 SW 21 STREET</u> <u>MIRAMAR, FL 33027</u>
<u>MGRM</u>	<u>LARRY SILVESTER</u> <u>13378 SW 21 STREET</u> <u>MIRAMAR, FL 33027</u>
<u>MGRM</u>	<u>JOE LATORRE</u> <u>13378 SW 21 STREET</u> <u>MIRAMAR, FL 33027</u>

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



 Signature of a member or an authorized representative of a member.
 (In accordance with section 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 s.817.155, F.S.)

DANIEL BAEZ

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)

FILED
 2015 MAR -9 AM 11:32
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

H150000594SR 3