US0009473)

(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	Sity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	Business Entity Name)	
(C	Oocument Number)	
Certified Copies	Certificates of Status	s
Special instructions to	o Filing Officer:	
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Office Use Only



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RECEIVED

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15 JUN -1 AM 10: 20

SELOND K BO NOT SEPARATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

NAME:

Tallhassee, F Phone: 850-55				
	ACCOUNT NO.	:	120000000195	
	REFERENCE	:	651926	6864A
	AUTHORIZATION	4	well of a sec	,
	COST LIMIT	7	\$ 150.00	
ORDER DATE :	June 1, 2015			
ORDER TIME :	4:12 PM			
ORDER NO. :	651926-020			
CUSTOMER NO:	6864A			

DOMESTIC AMENDMENT FILING

CAR-BIO MANAGEMENT, LLC

EFFECTIVE DATE:		<u>'</u>
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION	では、	AH 10: 20
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY YX PLAIN STAMPED COPY CERTIFICATE OF COOR STANDING		

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration Division of C				
CYIDIT		•	nagement, LLC		
SUBJE	C1:		of Resulting Florida		ed Company)
Busines	ss Entity" into		iability Company		, and fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
riease	eturn an con	espondence concernin	ig this matter to.		
Linda	M. Lee, Para	alegal			
, , , , , , , , , , , , , , , , , , , 		(Contact Person)			
Cozen	O'Connor				
		(Firm/Company)			
200 Fc	our Falls Cor	porate Ctr, Ste 400			
		(Address)			
West 0	Conshohock	en, PA 19428			
	((City, State and Zip Code)	,		
tstaz@	1848capital	.com			
E-ma	il Address: (to b	e used for future annual re	port notifications)		
For furt	her information	on concerning this ma	tter, please call:		
Linda L	_ee		at (610 ·	941	1-2378
	(Name of Conta	ct Person)		(Day	ytime Telephone Number)
Enclose	d is a check f	or the following amou	int:		
(\$25 for C	00 Filing Fees Conversion or Articles zation)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status
	T ADDRESS	S:			ADDRESS:
-	tion Section a of Corporati	one	Registra		Section Corporations
	ror Corporati Building	0115	P. O. Bo		
	ecutive Cente	er Cirole			EL 30314

Tallahassee, FL 32301

Certificate of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

The name of the "Other Business Entity" immediately prior to the filing of this Certifica Car-Bio Management, LLC	ate of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a limited liability company	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of	
December 13, 2013 (Enter state, or if a non-U.S. entity, the name on the control of the control	ne of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles Car-Bio Management, LLC	s of Organization:
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 date this document is filed by the Florida Department of State; AND 2) must be the sa date listed in the attached Articles of Organization, if an effective date is listed therein	me as the effective
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.	JUN -1 A
Page 1 of 2	AM 10: 28

•	
Signed this 29 day of May	20_15
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	en Juli
Printed Name: James R. Tolzien	Title: Authorized Person
111110011111111111111111111111111111111	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature:	ھـ
Printed Name: James R. Tolzien	Title: Authorized Person
Fillited Tyanie, Janies 11, Tolzien	Title. Authorized Ferson
S:	
Signature:	pos. 1
Printed Name:	1 itie:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Trinou rano.	
Cionatura	
Signature:	
Printed Name:	Title;

If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	<u>ty Partnership:</u>
Signature of one General Partner.	
_	
<u> Íf Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
~-8	
All others:	
Signature of an authorized person.	
Signature of an authorized person.	
r	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
- AT 0171 ADDAR OF MADDINGS,	/~F

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	Car-Bio Management, L	LC
SUBJE	Name of Limited Liability	Company
The end	enclosed Articles of Organization and fee(s) are submitted fo	or filing.
Please r	se return all correspondence concerning this matter to the fol	lowing:
	Linda M. Lee	
	Name of Pe	rson
	Cozen O'Connor	
	Firm/Comp	any
	200 Four Falls Corporate Center, Suite 400	
	Address	MANUFACTURE TO THE TOTAL T
	West Conshohocken, PA 19428	
	City/State and Z	ip Code
	tstaz@1848capital.com E-mail address: (to be used for f	liture annual report potification)
For furth	urther information concerning this matter, please call:	and annual report notations,
Linda L		941-2378
LIIIOA L	at () Name of Person Area Code	Daytime Telephone Number
	Ivalile of Person Area Code	Daytime Telephone Number
Enclosed	sed is a check for the following amount:	
\$125.00	Certificate of Status Certified	Copy Certificate of Status & Certificate Copy Certificate Of Status & Certificate Copy (additional copy is enclosed)
	Registration Section Re Division of Corporations Div P.O. Box 6327 Cli	reet/Courier Address gistration Section vision of Corporations flon Building 61 Executive Center Circle
	1 ananassee, 1 L 32314 200	11 Executive Center Chete

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Car-Bio Man	agement, LLC
(M		nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address	•	
	-	al office of the Limited Liability Company is:
Principal Office Addre	<u>ss:</u>	lailing Address:
1221 Brickell Avenue		1221 Brickell Avenue
Suite 2660		Suite 2660
Suite 2660 Miami, FL 33131 ARTICLE III - Register The Limited Liability Co	ompany cannot serve as its	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indi
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity v	ompany cannot serve as its on the serve as its of the registrans a street address of the registrans.	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are:
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity v	ompany cannot serve as its of with an active Florida registrates a street address of the registrates. James R. Tolzie	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are:
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity v	ompany cannot serve as its of with an active Florida registrates a street address of the registrates. James R. Tolzie	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are:
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity v	ompany cannot serve as its ovith an active Florida registrates a street address of the registrates R. Tolzie	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are:
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity versions) The name and the Florida	ompany cannot serve as its ovith an active Florida registrates a street address of the registrates R. Tolzie	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are: n ame enue, Suite 2660
Suite 2660 Miami, FL 33131 ARTICLE III - Register (The Limited Liability Coanother business entity versions) The name and the Florida	ompany cannot serve as its ovith an active Florida registrates a street address of the registrates R. Tolzie No. 1221 Brickell Av	Miami, FL 33131 ice, & Registered Agent's Signature: own Registered Agent. You must designate an indiation.) ered agent are: n ame enue, Suite 2660

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)

James R. Tolzien

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	Manie and Address.
'MGR" = Manager	
MGR	Thomas F. Staz
	1221 Brickell Avenue, Suite 2660
	Miami, FL 33131
ŧ	
MGR	James R. Tolzien
	1221 Brickell Avenue, Suite 2660
	Miami, FL 33131
	
Jse attachment if necessary)	
tive date is listed, the date must be s	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
tive date is listed, the date must be sp filing.)	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
V: Effective date, if other than the dat tive date is listed, the date must be spling.) VI: Other provisions, if any.	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
tive date is listed, the date must be spling.) VI: Other provisions, if any. EQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or
tive date is listed, the date must be sfiling.) VI: Other provisions, if any. EQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or
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tive date is listed, the date must be splitting.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a more	ember or an authorized representative of a member.
tive date is listed, the date must be spling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a macular contained of the section	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
tive date is listed, the date must be spling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a must be split accordance with section constitutes an affirmation to	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a million constitutes an affirmation of a may aware that any false in	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State
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VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation of a me aware that any false in constitutes a third degree for	ember or an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
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