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# COVER LETTER .

Filing Section sion of Corporations	
Gala Scientifique La	aboratoires, LLC
Name of	Limited Liability Company
Articles of Organization and fee(s	s) are submitted for filing.
all correspondence concerning thi	s matter to the following:
lga. E. Galarza	
	Name of Person
Gala Scientifique Lab	oratoires, LLC
	Firm/Company
020 High Ridge Road Ste 555	
	Address
oynton Beach, FL 33426	
	City/State and Zip Code
E-mail address: (to be t	sed for future annual report notification)
rmation concerning this matter, p	lease call:
	561 (561) 756-4523
Name of Person	Area Code Daytime Telephone Number
check for the following amount:	
g Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
	Gala Scientifique La  Name of  Articles of Organization and fee(s all correspondence concerning thi  Olga. E. Galarza  Gala Scientifique Lab  O20 High Ridge Road Ste 555  Oynton Beach, FL 33426  E-mail address: (to be termation concerning this matter, pl  ga E. Galarza  Name of Person  check for the following amount:  g Fee S130.00 Filing Fee &  Certificate of Status

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Gala Scientif	ique Labor	atoires, LLC	
(Must con	tain the words "Limited L	iability Company.	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal of	fice of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
3020 High Ridge Ro	oad Ste 555	302	0 High Ridge Road Ste 555	
Boynton Beach, FL 33426				
ARTICLE III - Registered Ag	ent, Registered Office, &	k Registered Age	nton Beach, FL 33426  nt's Signature: You must designate an individual or	
RTICLE III - Registered Ag	ent, Registered Office, & cannot serve as its own lactive Florida registration address of the registered	k Registered Age Registered Agent.	nt's Signature:	386
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, & y cannot serve as its own l active Florida registration	k Registered Age Registered Agent.	nt's Signature:	38.6 B
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, & cannot serve as its own lactive Florida registration address of the registered	& Registered Age Registered Agent. 1.) agent are:	nt's Signature:	
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, & cannot serve as its own lactive Florida registration address of the registered  Olga E. Galarza	Registered Age Registered Agent.  agent are:  Name  d Ste 555	nt's Signature: You must designate an individual or	Sec. By
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an	ent, Registered Office, & cannot serve as its own lactive Florida registration address of the registered  Olga E. Galarza  3020 High Ridge Roa	Registered Age Registered Agent.  agent are:  Name  d Ste 555	nt's Signature: You must designate an individual or	36.6

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Olga E. Galarza 3020 High Ridge Road Ste 555 Boynton Beach, FL 33426
(Use attachment if necessary)	e of filing: (OPTIONAL)
f an effective date is listed, the date must be spue date of filing.)	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as
ne document's effective date on the Department	• • • •
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Latura
<b>Signature of a m</b> This document is execular any fals	nember or an authorized representative of a member.  seted in accordance with section 605.0203 (1) (b), Florida Statutes.  see information submitted in a document of be Department of State

As Manager 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)