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#### FLORIDA LIMITED LIABILITY CO. Derma Care Research Labs, LLC

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# ARTICLES OF ORGANIZATION OF DERMA CARE RESEARCH LABS, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 605, *Florida Statutes*, hereby executes the following Articles of Organization.

## ARTICLE I

The name of the Limited Liability Company is DERMA CARE RESEARCH LABS, LLC.

### ARTICLE II ADDRESS

The street address and the mailing address of the principal office of the Company is 618 Ridgewood Ave., Holly Hill, FL 32117.

## ARTICLE III REGISTERED OFFICE AND AGENT

The name of the Registered Agent is **Richard W. Flanagan** and the Florida street address of the registered agent is **618 Ridgewood Ave.**, **Holly Hill, FL 32117**.

### ARTICLE IV MANAGEMENT

The Company is managed by a Managers. The persons initially appointed as Managers are **Richard W. Flanagan**, and **James E. Meadows**, **III**.

IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization on this  $\underline{\mathcal{H}}$  day of October, 2018.

Richard W. Flanagan

### STATE OF FLORIDA COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of October, 2018, by **Richard W. Flanagan**, who \( \pi \) is personally known to me, or \( \nabla \) presented a Florida drivers license or \( \pi \) \_\_\_\_\_\_, as identification.

Notary Public
Michael A. Pyle
(Printed Name)

My Commission Expires:

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#### **ACCEPTANCE OF DESIGNATION**

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 605, Florida Statutes.

Richard W. Flanagan, Registered Agen