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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

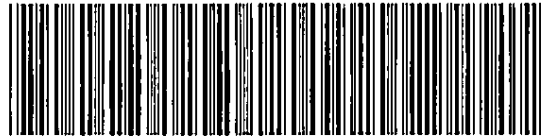
(Business Entity Name)

(Document Number)

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19 MAR 27 PM 12:52

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Epithelial Reconstruction, LLC

Signature _____

Requested by: Seth

04/01/19

Name

Date

Time

Walk-In

Will Pick Up

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

**ARTICLES OF ORGANIZATION
OF
EPITHELIAL RECONSTRUCTION, LLC**

The undersigned organizer and representative, desiring to form a limited liability company pursuant to the Florida Limited Liability Company Act, hereby submits, and files with the Florida Department of State, these Articles of Organization.

ARTICLE I – Name

The name of the limited liability company shall be:

EPITHELIAL RECONSTRUCTION, LLC

ARTICLE II – PURPOSE

Business activities shall include, but not be limited to, reconstruction of the integrity of the integument following surgical or dermatological ablative procedures. The company shall have the same powers as an individual to do all things necessary to carry out its business and affairs, including without limitation, all powers permitted by the Florida Limited Liability Company Act.

ARTICLE III – ADDRESS

The mailing address of the company shall be:

P.O. Box 66286
St. Pete Beach, FL 33736-6286

The business address of the company shall be:

6619 Canton Street South
St. Petersburg, FL 33712

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ARTICLE IV -- DURATION

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall be perpetual, unless dissolution or conversion occurs according to law.

ARTICLE V – REGISTERED OFFICE AND AGENT

The name and street address of the Registered Agent of the company in the State of Florida is:

John N. Bowman
3950 3rd Street North
St. Petersburg, FL 33703

ARTICLE VI -- ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the company only on the unanimous consent of all the members.

ARTICLE VII -- ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all the other members of the company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

ARTICLE VIII -- TERMINATION OF EXISTENCE

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by the consent of all the remaining members, provided there are at least two remaining members.

ARTICLE IX -- MANAGEMENT

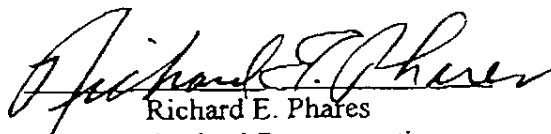
The company shall be managed by its members and managers in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name, address and title of the initial manager of the company is:

Richard E. Phares
Managing Member
P.O. Box 66286
St. Pete Beach, FL 33736-6286

ARTICLE X - INDEMNIFICATION AND LIABILITY

The Company may, as determined by the managers of the Company, indemnify and advance expenses to a Member, Manager, employee or agent of the Company in connection with any proceeding, to the extent permitted by and in accordance with applicable laws and statutes and the regulations of the Company.

IN WITNESS WHEREOF, the undersigned representative has executed these Articles of Organization on this 26th day of March, 2019, and hereby acknowledges that the facts stated herein are true.


Richard E. Phares
as Authorized Representative

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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.

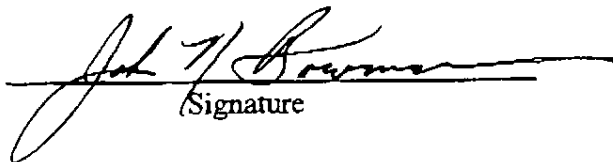
1. The name of the corporation is:

EPITHELIAL RECONSTRUCTION, LLC

2. The name and address of the registered agent and office is:

John N. Bowman
3950 3rd Street North
St. Petersburg, FL 33703

Having been named as registered agent and agreeing to accept service of process for the above stated corporation 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.


Signature


Date

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