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PICK-UP WAIT MAIL
(Business Entity Name)
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**EXAMINER** 



•
ACCOUNT NO. : 12000000195
REFERENCE : 140036 4319460
AUTHORIZATION : Special section :
REFERENCE: 140036 4319460 0 500 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
ORDER DATE: September 29, 2009 RESUBMIT
ORDER TIME : 2:06 PM Please give original
ORDER NO.: 140036-005
CUSTOMER NO: 4319460
FOREIGN FILINGS  NAME: GARDEN OF LIFE LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Heather Chapman EXT# 2908

EXAMINER:



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

NOT INTERDED & TO ACKNOWLEDGE SUFFICIENCY OF FILING

2009 OCT 21

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2009

HEATHER CHAPMAN CSC TALLAHASSEE, FL

SUBJECT: GARDEN OF LIFE LLC

Ref. Number: W09000043521

RESUBMIT

Please give original submission date as file date.

We have received your document for GARDEN OF LIFE LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 909A00031736

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREICN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Garden of Life	LLC			
(Name of Foreign	Limited Liability Company; must inclu	ide "Limited Liability C	ompany," "L.L.C.," or "LL	.C.")
G of Life LLC			· 1000000000000000000000000000000000000	
	er alternate name adopted for the purpoor managing members adopting the alte LC.")			
2. Delaware		3. 27-0922527		
(Jurisdiction under the company is organized)	law of which foreign limited liability	(FE) n	umber, if applicable)	
4. September 14, 2		5. Perpetual		
(Date o	f Organization)	(Duration: Year line exist or "perpetual"	nited liability company will ')	cease to
6. September 21,	2009	, ,		cease to 09 SEP 29 PH 3
	(Date first transacted business in FI (See sections 608.501 & 608.502 F.S	orida, if prior to registra i, to determine penalty li	tion.) ability)	ني ي
7. 5500 Village B	oulevard, Suite 202			<u>,</u>
West Palm Bea	ich, Florida 33407			<del>عد</del> بن
	(Street Address	of Principal Office)		
8. If limited liability	company is a manager-managed	I company, check he	re 🗌	•
9. The name and usu	nal business addresses of the man	aging members or n	nanagers are as follows	s:
Atrium Biotecl	n Investments, Inc., Single N	1ember	·	·
490 Boston Po	st Road, Sudbury, MA 0177	6		
·			<u> </u>	<u> </u>
the jurisdiction under the l	l certificate of existence, no more than 90 aw of which it is organized. (A photocop e under ceth of the translator must be sub-	y is not acceptable. If the		•
11. Nature of busine	ss or purposes to be conducted o	r promoted in Florid	la:	<del></del>
Developer and	marketer of nutritional supp	olements	`	
	M	7		_
	Signature of a member or an au (In accordance with section 608.408(3), It an affirmation under the penalties of perjusted JEAN GA	7.S., the execution of this di jury that the facts stated he	ocument constitutes	
	Tymad or printed	I name of signee		

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLÖRIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Compa	ny is:		
Garden of Life LLC			
If name unavailable, the alternate name to be	used in the state of Florida is		
G of Life LLC			
2. The name and the Florida street address of	f the registered agent and office are:		
Corporation Service Cor	npany		
	(Name)		
1201 Hays Street	•		
Florida Street Addre	ess (P.O. Box NOT ACCEPTABLE)		
Tallahassee	FL 32301		
	- City/State/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 608, Florida Statutes.

Corporation Service Company

BY: Nan Steel asstv. P

Doreen S. Haeselin, Asst. V.P.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

5.00

#### WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Garden of Life LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Delaware
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
G of Life LLC
(Name to be used by limited liability company in Fiorida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: October 16, 2009
Signature(s) of Manager(s) and/or Managing Member(s):
Atrium, Biotech Investments, Inc.
By: Les Ull
Serge Yelle
,

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GARDEN OF LIFE LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GARDEN OF LIFE LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Jeffrey W. Bullock, Secretary of Str AUTHENTYCATION: 7554109

DATE: 09-29-09

You may verify this certificate online at corp.delaware.gov/authver.shtml