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COVER LETTER

TO:

Registration Section

Div	ision of Corporation	18					
SUBJECT:	East Coast Biologic	s, LLC					
		Name of	Limited Liability	Company	·		
		reign Limited Liability Comp d to register the above refere					
Please return	all correspondence of	concerning this matter to the	following:				
	Michael J. Kin	g					
		N'	ame of Person				
	Winters & Kin	g, Inc.					
		Fi	irm/Company			- · · · · · · · · · · · · · · · · · · ·	
	2448 East 81st	Street Suite 5900					
			Address				
	Tulsa, OK 741.	37				2010 SEF	
		City/S	tate and Zip Code			138 138	1 1
	sduncan@winter	sking.com				FIG.	1
		E-mail address: (to be used	d for future annua	l report no	tification)	是是	T
For further in	nformation concernin	g this matter, please call:				STATE FLORID	4
Mic	chael J. King		918 at (494-68)	68		i b
	Name o	of Contact Person	Area Code	Day	time Telephone Nun	nber	
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding centive Center Circle see, FL 32301		
	check for the follow 125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filid Certified Copy	ng Fee &	☐ \$160.00 Filing lof Status & Certifi		

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate i	name adopted for the purpose of transacting business in Flu	wida. The alternate name must include "Limited Li-	ability Company " "L.I. C " or "LLC")			
_{2.} Arizona		3 83-1250666				
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)				
1.						
	(Date first transacted business in Flonda, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration) ine penalty liability)				
17888 67th Court Nor		6 17888 67th Court North				
(Street Address of Principal Office)		(Mailing Address)				
Loxahatchee, FL 3347	0	Loxahatchee, FL 33470	-1 22			
			27 E			
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	表现 三 广			
Name:	InCorp Services, Inc.					
			TG: 2			
Office Address:	17888 67th Court North		5 N			
	Loxahatchee	, Florida 33470	깊으 😃			
	(Crty)	(Zip cox				
o comply with the provising accept the obligations	s of my position as registered agent.	s registered agent and agree to act and complete performance of my Acosta on behalf of InCorp	duties, and I am familiar wi			
nd accept the obligations	s of my position as registered agent. Nicole A (Registered agent's s	and complete performance of my Acosta on behalf of InCorpary	duties, and I am familiar wit			
ind accept the obligations	s of my position as registered agent.	and complete performance of my Acosta on behalf of InCorpary	duties, and I am familiar wit			
and accept the obligations 7 8. The name, title or capa	s of my position as registered agent. Nicole A (Registered agent's s acity and address of the person(s) who has	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
B. The name, title or capa	reity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
and accept the obligations 7. The name, title or capa Title or Capacity:	s of my position as registered agent. Nicole A (Registered agent's s acity and address of the person(s) who has Name and Address: ECB, LLC	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
B. The name, title or capa	reity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
8. The name, title or capa	reity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
8. The name, title or capa Title or Capacity: MBR	sof my position as registered agent. Nicole A (Registered agent's state) Registered agent's state and address: ECB, LLC 2448 E 81st St Tulsa, OK 74137	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
B. The name, title or capa Title or Capacity: MBR	sof my position as registered agent. Nicole A (Registered agent's state) Registered agent's state and address: ECB, LLC 2448 E 81st St Tulsa, OK 74137	and complete performance of my Acosta on behalf of InCorporature) s/have authority to manage is/are:	duties, and I am familiar with Services, Inc.			
B. The name, title or capa Title or Capacity: MBR Use attachments if necess.	sof my position as registered agent. Nicole A (Registered agent's secity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St Tulsa, OK 74137 Sary) of existence, no more than 90 days old, descriptions.	Acosta on behalf of InCorpaignature) s/have authority to manage is/are: Title or Capacity:	Name and Address:			
8. The name, title or capa Title or Capacity: MBR Use attachments if necess Attached is a certificate arisdiction under the law of	icity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St Tulsa, OK 74137	Acosta on behalf of InCorpaignature) s/have authority to manage is/are: Title or Capacity:	Name and Address:			
8. The name, title or capa Title or Capacity: MBR (Use attachments if necess) Attached is a certificate arisdiction under the law of the translator must be sur	sof my position as registered agent. Nicole A (Registered agent's state) Recity and address of the person(s) who has a new and Address: ECB, LLC 2448 E 81st St Tulsa, OK 74137 Tulsa, OK 74137 Sary) of existence, no more than 90 days old, dof which it is organized. (If the certificate bmitted)	Acosta on behalf of InCorporature) s/have authority to manage is/are: Title or Capacity: July authenticated by the official has is in a foreign language, a translat	Name and Address: ving custody of records in the ion of the certificate under oat			
B. The name, title or capa Title or Capacity: MBR Use attachments if necess. Attached is a certificate arisdiction under the law of the translator must be sure.	icity and address of the person(s) who has Name and Address: ECB, LLC 2448 E 81st St Tulsa, OK 74137	Acosta on behalf of InCorporature) s/have authority to manage is/are: Title or Capacity: July authenticated by the official hat is in a foreign language, a translat (1) (b), Florida Statutes, I am awar	Name and Address: ving custody of records in the ion of the certificate under out that any false information			
8. The name, title or capa Title or Capacity: MBR (Use attachments if necess) Attached is a certificate urisdiction under the law of the translator must be sure. O. This document is execu	sof my position as registered agent. Nicole A (Registered agent's state) Registered agent's state and address of the person(s) who has a second address: ECB, LLC 2448 E 81st St Tulsa, OK 74137 Tulsa, OK 74137 Tulsa of existence, no more than 90 days old, dof which it is organized. (If the certificate bmitted) ated in accordance with section 605,0203	Acosta on behalf of InCorporature) s/have authority to manage is/are: Title or Capacity: July authenticated by the official hat is in a foreign language, a translat (1) (b), Florida Statutes, I am awar	Name and Address: ving custody of records in the ion of the certificate under out that any false information			
8. The name, title or capa Title or Capacity: MBR (Use attachments if necess) Attached is a certificate urisdiction under the law of the translator must be sure. O. This document is execution.	sof my position as registered agent. Nicole A (Registered agent's state and address of the person(s) who has a same and address: ECB, LLC 2448 E 81st St Tulsa, OK 74137 Tulsa, OK 74137 of existence, no more than 90 days old, dof which it is organized. (If the certificate bmitted) ated in accordance with section 605.0203 the Department of State constitutes a thir	Acosta on behalf of InCorporature) s/have authority to manage is/are: Title or Capacity: July authenticated by the official hat is in a foreign language, a translat (1) (b), Florida Statutes, I am awar	Name and Address: ving custody of records in the ion of the certificate under out that any false information			
B. The name, title or capa Title or Capacity: MBR Use attachments if necess. Attached is a certificate arisdiction under the law of the translator must be sure.	sof my position as registered agent. Nicole A (Registered agent's state) Registered agent's state and Address: ECB, LLC 2448 E 81st St Tulsa, OK 74137 Sary) of existence, no more than 90 days old, do of which it is organized. (If the certificate bmitted) ated in accordance with section 605.0203 the Department of State constitutes a thir	Acosta on behalf of InCorporation of my Acosta on behalf of InCorporation	Name and Address: ving custody of records in the ion of the certificate under oar			





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

East Coast Biologics, LLC

ACC file number: 1874920

was incorporated under the laws of the State of Arizona on 07/06/2018, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 07/31/2018

Ted Vogt, Executive Director

