

STATE OF GEORGIA
Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Glucell Medic, LLC
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **06/29/2019** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on **07/02/2019**.



Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION
OF
GLUCCELL MEDIC, LLC.

Article 1

The name of the limited liability company shall be Glucell Medic, LLC.

Article 2

The purpose for which this limited liability company is organized is to engage in any lawful act or activity for which a limited liability corporation may be organized pursuant to the limited liability law of the State of Georgia.

Article 3

Management and organizers of the limited liability company is vested in the following persons whose names and addresses are as follows:

- | | |
|----------------------|------------------------------------------|
| 1. Ellis I. Efobi | 2039 Copper Lakes Drive, Grayson, 30017 |
| 2. Uzoamaka L. Efobi | 2039 Copper Lakes Drive, Grayson, 30017. |

Article 4

The registered office street address of LLC in Georgia is 2039 Copper Lakes Drive, Grayson, 30017. The registered agent name is Ellis I. Efobi. The registered agent's address is 2039 Copper Lakes Drive, Grayson, 30017.

Article 5

The existence of the limited liability company shall be perpetual unless dissolved

Article 6

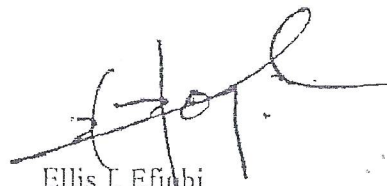
The liability of the aforementioned initial organizer and management of the limited liability company for monetary damages shall be eliminated to the fullest extent permissible under the Georgia law. The corporation is authorized to indemnify the initial organizers, management and directors and the officers of the corporation to the fullest extent permissible under Georgia law.

Article 7

The principal mailing address of the limited liability company is 2039 Copper Lakes Drive, Grayson, 30017.

IN WITNESS WHEREOF, the undersigned, have executed these Articles of organization

This 26th day of June, 2019.


Ellis I. Efobi
Organizer



Secretary of State

**OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION**

2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
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sos.ga.gov

Electronically Filed
Secretary of State
Filing Date: 6/29/2019 5:39:29 PM

**TRANSMITTAL INFORMATION FORM
GEORGIA LIMITED LIABILITY COMPANY**

Primary Email Address: janicgroup@gmail.com

1. _____
LLC Name Reservation Number (If one has been obtained; if articles are being filed without prior reservation, leave this line blank.)

Glucell Medic, LLC

LLC Name (List exactly as it appears in articles.)

2. **Ellis Efobi**
Name of Person Filing Articles of Organization

2039 Copper Lakes Drive	Grayson	GA	30017
Address	City	State	Zip Code

3. **2039 Copper Lakes Drive**
Principal Office Mailing Address of LLC (Unlike registered office address, this may be a post office box.)

Grayson	GA	30017
City	State	Zip Code

4. **Ellis Efobi**
Name of Registered Agent in Georgia

2039 Copper Drive
Registered Office Street Address in Georgia (Post office box or mail drop not acceptable for registered office address.)

Grayson	Gwinnett	GA	30017
City	County	State	Zip Code

janicgroup@gmail.com
Registered Agent's Email Address

5. Name and Address of Each Organizer

Ellis I Efobi	2039 Copper Lakes Drive	Grayson	GA	30017
Organizer	Address	City	State	Zip Code

Uzoamaka L Efobi	2039 Copper Lakes Drive	Grayson	GA	30017
Organizer	Address	City	State	Zip Code

6. Submitted with this filing is a filing fee of \$100.00 payable to "Secretary of State". Filing fees are non-refundable.

I understand that this Transmittal Information Form is included as part of my filing, and the information on this form will be entered in the Secretary of State business entity database. I certify that the above information is true and correct to the best of my knowledge.

Ellis Efobi
Signature of Authorized Person