# Florida Department of State

# Division of Corporations

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634~3694 Fax Number

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# LIMITED LIABILITY COMPANY

# HEMASOFT OF NORTH AMERICA, L.L.C.

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DIVISION OF CORPORATION

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#### ARTICLES OF ORGANIZATION

OF.

### HEMASOFT NORTH AMERICA, L.L.C. .

The undersigned, desiring to form a Limited Liability Company pursuant to Florida Statutes Chapter 608 hereby state as follows:

## ARTICLE\_I

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The name of this Limited Liability Company shall be HEMASOFT NORTH AMERICA, L.L.C.

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## ARTICLE II

The existence of this Company shall commence when these Articles of Organization are filed with the Secretary of State of the State of Florida and the Company shall have a perpetual existence.

#### ARTICLE III

The purpose for which this Company is organized is the sale and promotion of laboratory software, or such other business as the Members may agree.

# ARTICLE IV

The initial place of business and mailing address of the Company shall be 6157 N.W. 167th Street, #F-23. Miami, Florida 33015.

## ARTICLE V

The Company's initial registered agent for service of process in the State of Florida shall be Martin C. Engelmann whose address is 6157 N.W. 167th Street, #F-23, Miami, Florida 33015.

Prepared By:
Melison K. Rashbaum, Esq.
1815 Griffin Road, Suite 200
Ft. Lauderdale, FL 33004
954-342-3484
Florida Bar Number 0059854

1

## ARTICLE VI

No member may be admitted to the Company other than as provided in the Regulations from time to time adopted by the members hereof.

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of any member hereof or upon the occurrence of any other event which terminates the continued membership of any member hereof, the remaining members shall have the right pursuant to Regulations adopted by said members to continue the existence of this Company.

#### ARTICLE VII

The management of this Company is reserved to the members. The initial managing member is Martin C. Engelmann whose address is 6157 N.W. 167th Street, 4F-23, Miami, Florida 33015.

IN WITNESS WHEREOF, the undersigned, being a member of the above-named Company, for the purpose of forming a limited liability company to do business both within and without the State of Florida, under the laws of Florida, does make and file these Articles, hereby declaring and certifying that the facts herein stated are true, and executes these Articles of Organization this 13 day of March, 2002.

Wartin C. Engelmann, member

STATE OF FLORIDA

) | BS :

COUNTY OF BROWARD

The foregoing Articles of Organization was acknowledged to me this 13th day of March, 2002, by Martin C. Engelmann, who is personally known to me or whopproduced as identification and who took an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Notary Public, State of Florida

My Commission Expires:



# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.407 and Section 48.091, Florida Statutes, the undersigned 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 limited liability company is: HEMASOFT NORTH AMERICA, C. L.L.C.
- 2. The name and address of the registered agent and office is: Martin 2. Engelmann whose address is 6157 N.W. 167th Street, #F-23, Miami, Florida 33018.

Martin C. Engelmann, C. Registered Agent 3/\_/02

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 PAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Martin C. Engelmann, Registered Agent 3/\_\_/02

3