2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000038085

Entity Name: INNOVATIVE MEDICAL INSTRUMENTS, LLC

FILED Mar 31, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4063 SALISBURY ROAD 4063 SALISBURY ROAD SUITE 107 SUITE 208

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

4063 SALISBURY ROAD 4063 SALISBURY ROAD

SUITE 107 SUITE 208

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUSEMAN, WILLIAM R ESQ.
3733 UNIVERSITY BLVD. WEST
SUITE 210-B
J. KEITH M. SANDS, P.A.
4720 SALISBURY ROAD
SUITE 56

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32256 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

ADDITIONS/CHANGES:

SIGNATURE: J. KEITH M. SANDS 03/31/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MBR () Delete Title: MGR (X) Change () Addition Name: FREEDMAN, DONALD S Name: FREEDMAN, DONALD S

 Address:
 4063 SALISBURY ROAD, STE 107
 Address:
 4063 SALISBURY ROAD, STE 208

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 JACKSONVILLE, FL 32216

Title: MBR () Delete Title: MGR (X) Change () Addition

Name: CAMPBELL, DAVID Name: CAMPBELL, DAVID

 Address:
 4063 SALISBURY ROAD, STE 107
 Address:
 4063 SALISBURY ROAD, STE 208

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID CAMPBELL MGR 03/31/2008