



## MEMORY TRANSMISSION REPORT

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Division of Corporations

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From: ACCOUNT Name : SCHNEIDER WEINBERGER LLP  
ACCOUNT NUMBER : 120030000066  
Phone : (362) 362-8595  
Fax Number : (362) 362-3512

## LIMITED LIABILITY COMPANY

U.S. Back Brace, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
U.S. BACK BRACE, LLC**

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes.

**ARTICLE I  
NAME**

The name of this limited liability company is U.S. Back Brace, LLC (the "Company").

**ARTICLE II  
ADDRESS**

The Company's mailing address and street address of the principal office of the Company is 123 N.W. 13<sup>th</sup> Street, Suite 30404, Boca Raton, Florida 33432.

**ARTICLE III  
REGISTERED AGENT AND OFFICE**

The name of the initial registered agent of the Company is Jesse Berger, whose address is 123 N.W. 13<sup>th</sup> Street, Suite 313, Boca Raton, Florida 33432.

**ARTICLE IV  
MANAGEMENT**

The Company will be a manager-managed Company. The Company shall have two (2) managers.

Jesse Berger -- MGR  
123 N.W. 13<sup>th</sup> Street, Suite 313  
Boca Raton, Florida 33432

Jared Robinson -- MGR  
123 N.W. 13<sup>th</sup> Street, Suite 313  
Boca Raton, Florida 33432


**ARTICLE V  
MEMBERS RIGHTS TO CONTINUE BUSINESS**

If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of a member in the Company, the remaining members may continue the business of the Company in the manner provided in the Operating Agreement of the Company.

The undersigned executed these Articles of Organization on this 19<sup>th</sup> day of July 2004.

Authorized Representative of the Members:

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
\_\_\_\_\_  
Jesse Berger

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA 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 company is

U.S. Back Brace, LLC

2. The name and the Florida address of the registered agent are:

Jesse Berger  
123 N.W. 13<sup>th</sup> Street, Suite 313  
Boca Raton, Florida 33432

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

By:   
JESSE BERGER