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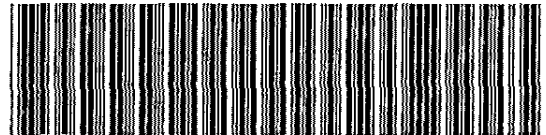
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December 8, 2004

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Surgical Safety Institute, LLC

(effective date 12/1/04)

**EFFECTIVE DATE**  
12/1/04

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

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NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

ARTICLES OF ORGANIZATION  
OF  
SURGICAL SAFETY INSTITUTE, LLC

EFFECTIVE DATE  
12/1/04

FILED  
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TALLAHASSEE, FLORIDA

The undersigned hereby certifies that she is the Authorized Representative of a Member who is forming a Limited Liability Company under Florida Statutes Chapters 608. The following Articles of Organization are hereby adopted.

ARTICLE 1.  
NAME

The name of the Limited Liability Company shall be Surgical Safety Institute, LLC.

ARTICLE 2.  
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of December 1, 2004.

ARTICLE 3.  
ADDRESS; PRINCIPAL OFFICE

The mailing address of the Limited Liability Company and the street address of the principal office of the Limited Liability Company is 4951 West Bay Way Drive, Tampa, Florida 33629.

ARTICLE 4.  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 4951 West Bay Way Drive, Tampa, Florida 33629 and the name of its initial registered agent at such address is Mary C. Karl.

ARTICLE 5.  
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

The undersigned, an Authorized Representative of a Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of Surgical Safety Institute, LLC.

Executed by the undersigned on November 30, 2004.

Mary C. Karl  
Mary C. Karl

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT  
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for Surgical Safety Institute, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this November 30, 2004.

Mary C. Karl  
Mary C. Karl