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Fax Number : (850)205-0383

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

6/02/16/05

LIMITED LIABILITY COMPANY
IMPLANTUS LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA
LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:
IMPLANTUS LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability
92 SADBERRY ROAD
QUINCY, FL 32351

**ARTICLE III REGISTERED AGENT, REGISTERED
OFFICE & REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent
A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351

Having been named as registered agent to accept service of process for the above stated 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Paul Smith Paul Smith V.P.

Registered Agent's Signature

[Handwritten Signature]

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

JEFF ST LAURENT

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