DOCUMENT # L06000061940

1. Entity Name
TISSUEMASTERS, LLC

Principal Place of Business

LAKE MARY, FL 32746

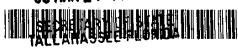
SIGNATURE:

725 PRIMERA BLVD. #215

ENTERED

FILED

08 MAR 24 PH 3: 33



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Mailing Address

725 PRIMERA BLVD. #215

LAKE MARY, FL 32746

01302008 No Chg-LLC

Feb 8, 2008

CR2E083 (12/07)

407 330 9696

4.	FEI Number		-		Applied For
	20-8917827				Not Applicable
5.	Certificate of Status	Desired		\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION 200 S. ORANGE AVE. SUITE 2600 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

		IN THIS SPACE
	tions of registered agent.	registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept FLLS, 2008. Parts S, 2008. Battered Agent signature required when reinstating)
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM SHARMA, NISHA 1774 BRIDGEWATER DRIVE HEATHROW, FL 32746	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		700119547507 03/06/0801008019 **438.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TRILE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated	certify that the information supplied with this filing does not qualify for I on this report is true and accurate and that my signature shall have tability company or the receiver or trustee empowered to execute this r	the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am a managing member or manager of the eport as required by Chapter 608, Florida Statutes.