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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,
And

Office Use Only



900108131799

08/17/07--01024--001 **150.00

SECHETARY OF STATE

DAVID R. FARBSTEIN, P.A.

Attorney at Law

8010 N. University Drive, 2nd Floor Tamarac, Florida 33322

> Phone (954) 586-0441 Fax (954) 586-0444

August ____, 2007

Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE:

Smith Orthopaedic, Inc.

Dear Sirs:

Enclosed please find the following documentation regarding the above-mentioned matter, to-wit,

1. ORIGINAL of Certificate of Conversion and Articles of Organizaation with an additional copy of each to send back to this office.

Also enclosed is my trust account check no.1568 in the amount of \$150.00 for the filing fees.

Very truly yours,

DAVID R. FARBSTEIN, ESQ.

DRF/me

FILEU

$\frac{\textbf{Certificate of Conversion}}{For}$

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filling of this 70 (
Certificate of Conversion is:
SMITH ORTHOPAEDICS, INC. WITE JOING
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CORPORATION</u>
(Enter entity type. Example: corporation, limited partnership, sole proprietorship
general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORTDA
(Enter state, or if a non-U.S. entity, the name of the country)
~
on <u>MAY 03.2007</u>
On MAY 03, 2007 (Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country
under the laws of which it is now organized, formed or incorporated:
N/A
4. The name of the Florida Limited Liability Company as set forth in the attached
Articles of Organization:
SMITH ORTHOPAEDICS, LLC
(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the ef (The effective date: 1) cannot be prior to nor medocument is filed by the Florida Department of effective date listed in the attached Articles of O listed therein.)	ore than 90 days after the date this State; <u>AND</u> 2) must be the same as the	
Signed this 25 day of Toly	_ 20 <u>07</u>	
Signature of Authorized Person:	Sil	
Printed Name: DONALD GREGORY SMITHTitle	: Managing Member	
Fees: Certificate of Conversion: Fees for Florida Articles of Organization:	SECHETARY OF STATE FLORIDA \$25.00 \$125.00	当日
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION

<u>OF</u>

SMITH ORTHOPAEDICS, LLC

ARTICLE I - Name

The name of the limited liability company is SMITH ORTHOPAEDICS, LLC.

ARTICLE II - Principal Office

The address of the principal office of this limited liability company is 505 NW 65th Ct., #102, Ft. Lauderdale,, Fl. 33309, and the mailing address shall be the same.

ARTICLE III Registered Office and Agent

The name of the initial registered agent within Florida is DONALD GREGORY SMITH and address is: 505 NW 65th Ct., #102, Ft. Landsdale, Fl. 33309.

Having been named as registered agent and to accept service of process for the above stated in the 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 statues 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 as provided in Chapter 608, F.S.

THIS DOCUMENT PREPARED BY: DAVID R. FARBSTEIN, ESQ.

8010 N. University Dr., 2nd Fl.

Tamarac, Fl. 33321 Fla. Bar No. 198889

954-586-0441

DONALD GREGORY SMITH

Registered Agent

ARTICLE IV - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. The management of the company is reserved to the members of the company, in proportion to their contribution to the capital of the limited liability company. The power to adopt, alter, amend, or repeal the regulations of this limited liability company shall be vested in the members of the company.

The names and addresses of the managing members are:

DONALD GREGORY SMITH

505 NW 65th Ct., #102 Ft. Lauderdale, Fl. 33309

IN WITNESS WHEREOF, the undersigned incorporators has executed these

Organization on the 2 day of 72, 2007.

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

DONALD GREGORY SMITH

STATE OF FLORIDA COUNTY OF BROWARD

BEFORE ME personally appeared, DONALD GREGORY SMITH, to me well known and known to me to be the individual(s) described in and who executed the foregoing instrument, and acknowledged before me that she executed the same for the purposes therein expressed. Further, said individual(s) furnished the following type of identification to the undersigned, to-wit:

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 25 day of 5007.

DAVID R. FARBSTEIN
MY COMMISSION # DD 281947
EXPIRES: March 7, 2008
Bonded Thru Budget Notary Services

NOTARY PUBLIC
My Commission Expires: