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To: Division of Corporations Number : (850)617-6383 Fax 911 From: Name AKERMAN SENTERFITT (MIAMI) ount Number : 075471001363 Account (305) 374-5600 Phone : (305) 374-5095 Fax Number :

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ORIDA/FOREIGN LIMITED LIABILITY CO.

GAP MEDICAL TECHNOLOGIES LLC

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NOV-09-07 12:12 From:AKERMAN SENTERFITT

FAX AUDIT No. H07000276118

ARTICLES OF ORGANIZATION FOR GAP MEDICAL TECHNOLOGIES LLC

ARTICLE 1 - Name:

The name of the Limited Liability Company is: Gap Medical Technologies LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1395 Brickell Avenue, Suite 720, Miami, FL 33131.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> CorpDirect Agents, Inc. 515 East Park Avenue Tallahassee, FL 32301

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 as provided for in Chapter 608, F S.

Registered Agent's Signature

ARTICLE IV - Manager:

The name and address of the Manager is Arthur Soares with address at 1395 Brickell Avenue Suite 720, Miami, FL 33131.

Signed and dated this 9th day of November, 2007.

Paulo Mirande



Authorized representative of the Members

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