

Electronic Articles of Organization For Florida Limited Liability Company

L08000024341
FILED 8:00 AM
March 07, 2008
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:

JOINT REPLACEMENT INSTITUTE, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:

14405 REFLECTION LAKES DR.
FORT MYERS, FL. US 33907

The mailing address of the Limited Liability Company is:

14405 REFLECTION LAKES DR.
FORT MYERS, FL. US 33907

Article III

The purpose for which this Limited Liability Company is organized is:

ORTHOPEDIC SURGICAL PRACTICE. □□□□□□□

Article IV

The name and Florida street address of the registered agent is:

HENRY BIGGS
14405 REFLECTION LAKES DR.
FORT MYERS, FL. 33907

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.

Registered Agent Signature: HENRY BIGGS

Article V

The name and address of managing members/managers are:

Title: MGRM
HENRY BIGGS
14405 REFLECTION LAKES DR.
FORT MYERS, FL. 33907 US

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Article VI

The effective date for this Limited Liability Company shall be:

03/06/2008

Signature of member or an authorized representative of a member

Signature: H. KURTIS BIGGS