

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L08000091931  
FILED 8:00 AM  
September 29, 2008  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:  
SHARPE HEALTHCARE SOLUTION LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
302 HARBOUR POINTE WAY  
GREENACRES, FL. US 33413

The mailing address of the Limited Liability Company is:  
PO BOX 542704  
LAKE WORTH, FL. US 33454

**Article III**

The purpose for which this Limited Liability Company is organized is:  
SUPPLIER OF MEDICAL, SURGICAL, AND DIAGNOSTIC SUPPLIES,  
EDUCATION AND SERVICES. ANY LAWFUL PURPOSE.

**Article IV**

The name and Florida street address of the registered agent is:  
TRACEY S MCKELTON  
302 HARBOUR POINTE WAY  
GREENACRES, FL. 33413

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: TRACEY S. MCKELTON

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
TRACEY S MCKELTON  
PO BOX 542704  
LAKE WORTH, FL. 33454 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

09/25/2008

Signature of member or an authorized representative of a member

Signature: TRACEY S. MCKELTON