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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

TRA MEDICAL, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION
TRA MEDICAL, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is TRA MEDICAL, LLC.

ARTICLE II – Addresses:

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

6822 22nd Avenue North
P.O. Box 430
St. Petersburg, FL 33710

The physical address of the principal office of the Limited Liability company is:

5959 Central Avenue
Suite 100
St. Petersburg, FL 33710

ARTICLE III – Management:

The Limited Liability Company is to be managed by a manager or managers. The initial manager shall be Aaron Sprague, President and CEO

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 23rd day of January, 2009.



Signature of a Member, or Authorized Representative of a Member.

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

Erin Smith Aebel

Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is TRA Medical, LLC.
2. The name and the Florida street address of the registered agent are:

Erin Smith Aebel
Shumaker, Loop & Kendrick, LLP
101 East Kennedy Blvd., Suite 2800
Tampa, Florida 33602

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.



Erin Smith Aebel, Registered Agent

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