

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

L09000065443  
FILED 8:00 AM  
July 07, 2009  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:  
MAGNAMEDIX, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1465 NW 143 AVE  
PEMBRIKE PINES, FL. US 33028

The mailing address of the Limited Liability Company is:  
1465 NW 143 AVE  
PEMBRIKE PINES, FL. US 33028

**Article III**

The purpose for which this Limited Liability Company is organized is:  
RESELLER OF MEDICAL INSTRUMENTS

**Article IV**

The name and Florida street address of the registered agent is:  
JOSUE VALENCIA  
1465 NW 143 AVE  
PEMBRIKE PINES, FL. 33028

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: JOSUE VALENCIA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
JOSUE VALENCIA  
1465 NW 143 AVE  
PEMBRIKE PINES, FL. 33028 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

07/07/2009

Signature of member or an authorized representative of a member

Signature: JOSUE VALENCIA