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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Total Spine Health Products, LLC

Certificate of Status	0
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EXAMINER

**ARTICLES OF ORGANIZATION
FOR
TOTAL SPINE HEALTH PRODUCTS, LLC
(a Florida limited liability company)**

The undersigned representative of the Member, desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization:

ARTICLE I. NAME

The name of the limited liability company is: TOTAL SPINE HEALTH PRODUCTS, LLC.

ARTICLE II. ADDRESS

The mailing address and street address of the principal office of the Company is:

3031 N. Rocky Point Drive E.
Suite 300
Tampa, Florida 33607

ARTICLE III. DURATION

The period of duration for the Company shall be perpetual, unless terminated in accordance with the Company's Operating Agreement or by the unanimous written consent of the Member(s).

ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company are:

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

ARTICLE V. MANAGEMENT

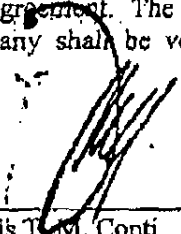
The business of the Company shall be conducted, carried on, and managed by no fewer than one Manager, who shall be elected by the Member(s) of the Company in the manner prescribed by and provided in the Operating Agreement of the Company. Therefore,

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Company is a manager-managed company. Such Manager(s) shall also have the rights and responsibilities described in the Operating Agreement of the Company.

ARTICLE VI. OPERATING AGREEMENT

The Company shall have an Operating Agreement. The power to adopt, alter, amend, or repeal the Operating Agreement of the Company shall be vested in the Member(s) of the Company.



Louis T. M. Conti
Authorized Representative of the Member

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT AND REGISTERED OFFICE
OF TOTAL SPINE HEALTH PRODUCTS, LLC**

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, Total Spine Health Products, LLC, a Florida limited liability company (the "Company"), hereby submits the following statement designating the registered office and registered agent in the State of Florida.

1. The name of the Company is: **TOTAL SPINE HEALTH PRODUCTS, LLC.**
2. The name of the registered agent and the address of the registered office are:

NAME: **CT CORPORATION SYSTEM**

ADDRESS: **1200 South Pine Island Road
Plantation, FL 33324**

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.

CT CORPORATION SYSTEM

By: _____

Date: September 3, 2009

Name: _____

Madonna Cuddihy

Title: _____

~~Special Assistant Secretary~~