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((H10000157276 3)))



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FLORIDA LIMITED LIABILITY CO.  
WearOpalite LLC

Certificate of Status	0
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G. MCLEOD

JUL 9 - 2010

EXAMINER

FAX AUDIT # H10000157276 3

**ARTICLES OF ORGANIZATION  
OF  
WearOpalite LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: WearOpalite LLC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 464 Kentucky Woods Lane West, Orlando, Florida 32824.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

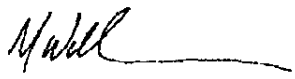
**ARTICLE IV DURATION**

The duration for the limited liability company shall be: Perpetual.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Jeanne Smith, 464 Kentucky Woods Lane West, Orlando, Florida 32824

  
Business Filings Incorporated, Organizer  
Mark Williams, A.V.P.  
Authorized Representative  
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,  
WI 53717  
608-827-5300

Date: July 8, 2010

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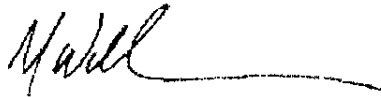
**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: WearOpalite LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.



Signature: \_\_\_\_\_  
Mark Williams, A.V.P. Business Filings Incorporated

Date: July 8, 2010

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**ARTICLE VI  
MANAGEMENT**

The Company is to be a manager-managed company. A manager may receive compensation for his or its services. The name and address of the initial manager is as follows:

Samuel P. Martin, M.D.  
70 W. Gore Street, Suite 202  
Orlando, FL 32806

**ARTICLE VII  
APPLICABLE LAW**

The Company is created pursuant to Chapters 608 and 621, Florida Statutes, and shall be governed by the laws of the State of Florida.

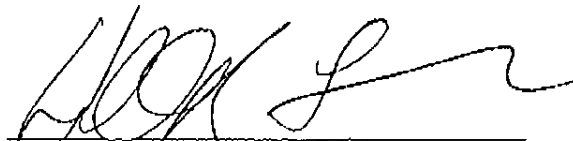


William R. Lowman, Jr., Esq., as  
Authorized Representative

**ACCEPTANCE OF DESIGNATION  
OF  
REGISTERED AGENT**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 of the Florida Statutes.



William R. Lowman, Jr., Esq.