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(Address)

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(City/State/Zip/Phone #)

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(Document Number)

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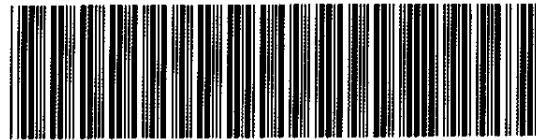
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LLC

1.

QD SYRINGE SYSTEMS LLC
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF ORGANIZATION
OF
QD SYRINGE SYSTEMS LLC

FILED
12 FEB-3 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby certifies that he is the Authorized Representative of the Member who is forming a Limited Liability Company under Florida Statutes Chapter 608. The following Articles of Organization are hereby adopted.

ARTICLE 1.
NAME

The name of the Limited Liability Company shall be QD SYRINGE SYSTEMS LLC.

ARTICLE 2.
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of the date on which these Articles of Organization are filed with the State of Florida Department of State.

ARTICLE 3.
ADDRESS; PRINCIPAL OFFICE

The mailing address of the Limited Liability Company and the street address of the principal office of the Limited Liability Company is 2700 72nd Street North, St. Petersburg, FL 33710.

ARTICLE 4.
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 2700 72nd Street North, St. Petersburg, FL 33710 and its initial registered agent at such address is David S. Massie.

ARTICLE 5.
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

The undersigned, being the Authorized Representative of the Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of QD SYRINGE SYSTEMS LLC.

Executed by the undersigned on January 27, 2012.



David S. Massie

Authorized Representative

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for QD SYRINGE SYSTEMS LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED: January 27, 2012.



David S. Massie