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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Floreta 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

STRYKER TECH	NOLOGIES, LLC				
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			LTD Partnership File		
		-	Foreign Corp. File		
			L.C. File		
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			Fictitious Name File		
			Trade/Service Mark		
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			RA Resignation		
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#### ARTICLES OF ORGANIZATION

#### OF

#### STRYKER TECHNOLOGIES, LLC

#### ARTICLE I - NAME

The name of the limited liability company is Stryker Technologies, LLC, ("company").

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability

#### Company is:

Principal Office Address: 680 E. Stanford Street Bartow, Florida 33830

Mailing Address: 680 E. Stanford Street Bartow, Florida 33830

#### ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Milo S. Elver 680 E. Stanford Street Bartow, Florida 33830

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.

.

#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

**MGMR** 

Milo S. Elver 680 E. Stanford Street

Bartow, Florida 33830

MGMR.

Ashley Elver 680 E. Stanford Street Bartow, Florida 33830

#### ARTICLE V - EFFECTIVE DATE

The effective date of this limited liability company, to wit: Stryker Technologies, LLC shall be the date of filing.

REQUIRED SIGNATURES:

Signature of a member or an 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.)

Milo S. Elver

Member and Manager

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF STRYKER TECHNOLOGIES, LLC

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY Stryker Technologies, LLC, 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 Stryker Technologies, LLC.
- 2. The name and the Florida street address of the registered agent and office are:

Milo S. Elver

680 E. Stanford Street,

Bartow, Florida 33830

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, Florida Statutes.

Milo S. Elver

Registered Agent