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2012 MAY -2 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY - 4 2012

EXAMINER



DRIVEN . FOCUSED . FEARLESS

April 26, 2012

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Blue Tip Medical, LLC

Dear Sir/Madam:

Please find enclosed for filing the following original documents for the above Limited Liability Corporation:

1. Florida Limited Liability Company Articles of Organization of Blue Tip Medical, LLC;
2. Operating Agreement of Blue Tip Medical, LLC;
3. Blue Tip Medical, LLC Members' and Managers' Organizational Action by Written Consent;
4. Blue Tip Medical, LLC Members' Action by Written Consent; and,
5. Securities Compliance Certificate.

Also enclosed is a check in the amount of \$125.00, representing satisfaction of the filing fee. Thank you for your attention. Please contact Kristin Kavanaugh in my office should you have any questions or concerns.

Very truly yours,

W. Riley Allen

WRA/kk

Enclosures

**TO SPEED YOUR RECEIPT,
THIS LETTER HAS BEEN
DICTATED BUT NOT READ.**

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TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION
OF
BLUE TIP MEDICAL, LLC**

Pursuant to Florida Statutes Chapter 608, "The Florida Limited Liability Company Act," as amended, the below named entity adopts these Articles of Organization, in accordance with the following:

ARTICLE I - NAME

The name of the Limited Liability Company is:

BLUE TIP MEDICAL, LLC

ARTICLE II - ADDRESS

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

429 S. Keller Road, Suite 300
Orlando, Florida 32810

ARTICLE III -REGISTERED AGENT

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

W. Riley Allen
429 S. Keller Road, Suite 300
Orlando, Florida 32810

Having been named as registered agent and to accept service of process for the above named 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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



W. Riley Allen, Esquire - Registered Agent's Signature

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ARTICLE IV - MANAGEMENT

This Limited Liability Company is to be managed by a manager or managers. The names and addresses of the persons who are to serve as the initial managers are:

W. Riley Allen
429 S. Keller Road, Suite 300
Orlando, Florida 32810

Arno Sarkis Sungarian
8 Tip Pond Rd
Shrewsbury, MA 01545

Bradley A. Cole
717 Seneca Meadows Road
Winter Springs, Florida 32708

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ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, to admit additional members and the terms and conditions of the admissions shall be as set forth in the Operating Agreement of this LLC as the same may be amended from time to time.

ARTICLE VI – EFFECTIVE DATE; PERPETUAL EXISTENCE

These Articles of Organization shall be effective and this Limited Liability Company's existence shall commence upon the filing of these Articles of Organization by the Secretary of State. Thereafter, this Limited Liability Company shall exist perpetually, except as otherwise provided by Sections 608.441, 608.448 and 608.449 of the Florida Statutes.



W. Riley Allen

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

W. Riley Allen

(Typed or printed name of an authorized representative of a Member)