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

From:
Account Name : BATTAGLIA ROSS CORPORATE
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**FLORIDA LIMITED LIABILITY CO.
VALVE-TECH MEDICAL, LLC**

Certificate of Status	0
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JUL 11 2013

**ARTICLES OF ORGANIZATION
FOR
VALVE-TECH MEDICAL, LLC
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

VALVE-TECH MEDICAL, LLC

ARTICLE II- Address:

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

Principal Office Address:

980 Tyrone Blvd.
St. Petersburg, FL 33710

Mailing Address:

P.O. Box 66765
St. Pete Beach, FL 33736

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Aubrey O. Dicus, Jr.
980 Tyrone Blvd.
St. Petersburg, FL 33710

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.



Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager

"MGRM" = Managing Member

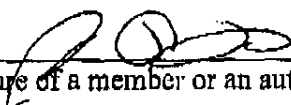
Title:

Name and Address:

MGRM

Michael F. Cannova
P.O. Box 66765
St. Pete Beach, FL 33736

REQUIRED SIGNATURE:


(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.)

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