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COVER LETTER

TO: Registration Division of	n Section Corporations				
SUBJECT: Sterile	Pens LLC Name of Lin	nited Liability Company			
The enclosed Articles	s of Organization and fee(s) a	re submitted for filing.			
Please return all corre	espondence concerning this n	natter to the following:			
Lee Gre	gg	Name of Person			
		Name of reison			
Sterile P	ens LLC	Firm/Company			
		run/Company		7A. 20	
3030 N I	Rocky Point Dr W Suite 15	0		2014 FEB	
	•	Address		HASA I	
				SER SER	F6-
Tampa F	1.33607	City/State and Zip Code		<u> </u>	ļ į
_lee@	1 1	1 S. Com d for future annual report notific	ation)	TONION STATE TO C	المسيدة
For further information	on concerning this matter, ple		•	-	
Lee Gregg		341-2987			
Nai	me of Person	Area Code Daytime Te	lephone Number		
Enclosed is a check for	or the following amount:				
☐ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee Certificate of Status Certified Copy (additional copy is end	s &	
Ma	ailing Address	Street/Courier Add	race		

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Sterile Pens LLC (Must end with the words "Limited"	Liability Company, "L.L.C.," or "LLC.")	-	
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:		
Principal Office Address: Mailin	ng Address:		
3030 N Rocky Point Dr.W.Suite 150 Tampa Fl 33607	Sterile Pens LLC 3030 N Rocky Point Dr. W Suite 150 Tampa Fl 33607	- 	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must designate an indiv	idual or	2014 1
The name and the Florida street address of the registered	agent are:	AHA	- FEE
Lee Gregg Name		esee Esee	ഗ
3030 N Rocky Point Dr.W Suit Florida street address (P.O. Box		JF STATE	PR 3-31
<u>Tampa</u>	FL 33607	-	* '
City	Zip		
Days	t the appointment as registered agent and agree of all statutes relating to the proper and complet	to act in te perfort	this nance
(CONTINUI	ED)		

Page 1 of 2

	Name and Address:
AMBR" = Authorized Member	
'MGR" = Manager MGR	Lee Gregg
	3030 N Rocky Point Dr W Suite 150
	Tampa FI 33607
	7
	•
V: Effective date, if other than the date of etive date is listed, the date must be speci	filing: <u>January 31 2014</u> . (OPTIONAL) ific and cannot be more than five business days prior to or 9
EV: Effective date, if other than the date of ctive date is listed, the date must be specif filing.)	filing: <u>January 31 2014</u> . (OPTIONAL) fic and cannot be more than five business days prior to or 9
Use attachment if necessary) EV: Effective date, if other than the date of ctive date is listed, the date must be specifilling.) EVI: Other provisions, if any.	filing: <u>January 31 2014</u> . (OPTIONAL) ific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of ctive date is listed, the date must be specifilling.) VI: Other provisions, if any. REQUIRED SIGNATURE:	ific and cannot be more than five business days prior to or 9
CV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a specific constitutes an affirmation under the date of the constitutes and affirmation under the date of the constitutes are affi	ber or an authorized representative of a member. 20203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, attion submitted in a document to the Department of State as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a strong (In accordance with section 605.) constitutes an affirmation under to I am aware that any false information constitutes a third degree felony and the Gregory.	ber or an authorized representative of a member. 0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
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