

**Electronic Articles of Organization**  
**For**  
**Florida Limited Liability Company**

L-15000169369  
FILED 8:00 AM  
October 05, 2015  
Sec. Of State  
tdcannon

**Article I**

The name of the Limited Liability Company is:  
PROSTHETIC DESIGN TECHNOLOGIES, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2875 S. ORANGE AVE.  
500-1710  
ORLANDO, FL. US 32806

The mailing address of the Limited Liability Company is:  
2875 S. ORANGE AVE.  
500-1710  
ORLANDO, FL. US 32806

**Article III**

The name and Florida street address of the registered agent is:  
LORI N WILLIAMS  
1099 HENRY BALCH DR.  
500-1710  
ORLANDO, FL. 32806

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.

Registered Agent Signature: LORI NOEL WILLIAMS

#### **Article IV**

The name and address of person(s) authorized to manage L

Title: MGR  
MICHAEL E LITTLES  
2875 S. ORANGE AVE., 500-1710  
ORLANDO, FL. 32806 US

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#### **Article V**

The effective date for this Limited Liability Company shall be:

10/05/2015

Signature of member or an authorized representative

Electronic Signature: LORI NOEL WILLIAMS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.