

Division of Corporations

Page 1 of 2

LS000191056

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000271765 3)))



H150002717653ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CARLTON FIELDS
Account Number : 076077000355
Phone : (813) 223-7000
Fax Number : (813) 229-4133

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

cures4mankind@gmail.com

FLORIDA LIMITED LIABILITY CO.
Prime OrthoStem Solutions LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

15 NOV 13 PM 5:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV 13 AM 5:02

FILED

**ARTICLES OF ORGANIZATION
OF
PRIME ORTHOSTEM SOLUTIONS LLC**

The undersigned, as the authorized representative of the organizing members of a limited liability company under the Revised Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

ARTICLE I

Name

The name of the Company is Prime OrthoStem Solutions LLC.

ARTICLE II

Initial Principal Office Street and Mailing Address

The Company's initial principal office street address and mailing address is 3830 Tampa Road, Suite 300, Palm Harbor, FL 34684.

ARTICLE III

Initial Registered Agent and Office

The street address of the Company's initial registered office is 3830 Tampa Road, Suite 300, Palm Harbor, FL 34684, and the name of its initial registered agent at that address is Dr. Robert Dean.

ARTICLE IV

Authorized Representative

The name and address of the authorized representative of the organizing members of the Company are:

Name

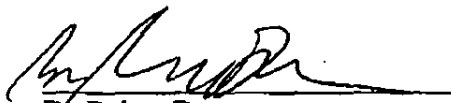
Dr. Robert Dean

Address

3830 Tampa Road
Suite 300
Palm Harbor, FL 34684

Dated this 12 day of November, 2015.

AUTHORIZED REPRESENTATIVE


Dr. Robert Dean

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV 13 AM 5:02

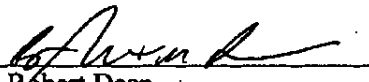
FILED

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 12 day of November, 2015.

REGISTERED AGENT:


Dr. Robert Dean