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то:	Division of Co Fax Number	rporations ; (850)617-6381
From:	Account Name Account Number Phone Fax Number	: LAZARUS CORPORATE FILING SERVICE, INC. : 120000000009 : (305)552-5973 : (305)675-5944
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	FLORIDA LIMITED LIABILITY CO. USAPREVASIVE, LLC			19 ž	
Cer	rtificate of Status	1		503	
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	ARTICLES OF ORGANIZATION
	FOR FLORIDA LIMITED LIABILITY COMPANY
	ARTICLE I - Name: The name of the Limited Liability Company is:
	USAPRENASIVE, LLC
• •	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability
	4250 N.W. 35 Court
:	MIMI FL 33142
-	ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
	MATTHEW M. BEYELS
	4250 NW 35 CONRT
	MIAMI FL 33142
	ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
	(AMBR) MATTHEN M. Beyers
	(AMBR) OSCAR PICON
	(AMBR) Lawrence WILLIAM LIPMAN =
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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.

MATTHEW M. BEYERS yped or printed name of signee

Having been named as registered agent and to accept service of process for the above stated limited hability company at the place designated in this certificate. I here by accept the appointment as registered agent and agree to act in this capacity. I further agrie 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 605, F.S..

## Registered Agent's Signature (REQUIRED)

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