

L99000005481

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Star Medical Distributors, L.L.C.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/
QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Name
Availability

MJH

Document
Examiner

Updater

Updater
Verifier

Acknowledgement

W. P. Verifier

Examiner's Initials

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 SEP - 1 PM 1:45

800002975808--5

-09/01/99-01048-004

****285.00 ****285.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 SEP - 1 AM 11:37

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 SEP - 1 PM 1:45

**ARTICLES OF ORGANIZATION
OF
STAR MEDICAL DISTRIBUTORS, L.L.C.**

The undersigned as organizer of a limited liability company, under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company:

Article I -- Name

The name of the Limited Liability Company is **STAR MEDICAL DISTRIBUTORS, L.L.C.**

Article II -- Address

The mailing office and street address of the principal office of the Company is 1800 N. Commerce Parkway #2 Weston, FL 33326.

Article III -- Duration

The duration of the Limited Liability Company is perpetual.

Article IV- Registered Agent and Office

The name of the initial registered agent within the State of Florida is Jay D. Mussman, and the street address is 5881 N.W. 151 Street #101 Miami Lakes, Florida 33014.

Article V- Members

This Limited Liability Company has one (1) member whose name and address is:

The Kusher Family Limited Partnership, a Nevada Limited Partnership, 241 Ridge Street, 4th Floor, Reno, Nevada 89501

No additional members shall be admitted unless a majority of all members, (including any additional members) shall agree, and on such terms and conditions as shall be agreed by the majority.

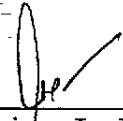
The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any other event which terminates the continued membership of a member in this limited liability company, shall terminate this company, unless the remaining members shall unanimously agree to continue the business of this company, in which event, this company shall not so terminate.

Article VI – Management

The management of this company is vested in the Manager listed below and who is to serve as Manager until the first annual meeting of members or until his successor is elected and qualify. The power to adopt, alter, amend or repeal the regulations of this limited liability company shall be vested in the members of the company. The name and address of the Manager is:

Robert Kusher 1800 N. Commerce Parkway #2 Weston, Florida 33326

IN WITNESS WHEREOF, the undersigned organizer has executed these Articles of Organization on this 31st day of August, 1999.



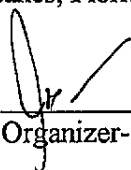
Organizer- Jay D. Mussman

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

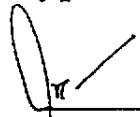
Pursuant to the provisions of section 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is: **STAR MEDICAL DISTRIBUTORS, L.L.C.**

2. The name and address of the registered agent and office is : Jay D. Mussman, and the street address is 5881 N.W. 151 Street #101 Miami Lakes, Florida 33014.


Organizer- Jay D. Mussman

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 and the Articles of Organization, 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.


JAY D. MUSSMAN
(Registered Agent)

Date: 8-31-99

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned authorized representative of a member of **STAR MEDICAL DISTRIBUTORS, L.L.C.**, deposes and says:

1. The above named limited liability company has at least one (1) member.
2. The total amount of cash contributed by the member is \$0.00.
3. If any, the agreed value of property other than cash contributed by the member is \$0.00. A description of the property is as follows: none
4. The total amount of cash or property anticipated to be contributed by the member is \$700,000.00. This total includes amounts from 2 and 3 above.



Authorized Representative of a Member
Jay D. Mussman

Date: 8-31-99