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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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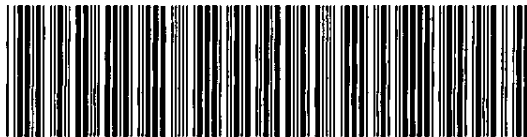
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DIVISION OF CORPORATION
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JANETTE L. GATEMAN
ASSISTANT TO JAMES ROMZEK
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October 20, 2008

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

Re: **Action Bandage, LLC**

Dear Sir/Madam:

Enclosed for filing please find:

1. Application by Foreign Limited Liability Company
for Authorization to Transact Business in Florida
2. Designation of Registered Agent
3. \$125.00 filing fee

Please return a filed copy of the Application and the Designation of Registered Agent in the enclosed self-addressed, stamped envelope. If you require anything further in order to process this request, please contact the undersigned at the above direct dial. Thank you for your assistance.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Janette L. Gateman', written over a circular stamp.

Janette L. Gateman
Assistant to Jennifer Dudley, Esq.

JLG/jlg

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. **Action Bandage, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. **State of Michigan**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. **09-26-2008**

(Date of Organization)

5. **Perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **N/A**

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. **61741 Campground, Washington, MI 48094**

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:


Dale Wells, 61741 Campground, Washington, MI 48094

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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: **Sales of medical equipment, supplies, etc.**


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Lawrence Rinke, Member

Typed or printed name of signee

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Action Bandage, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Lawrence M. Rinke

(Name)

84 Stony Drive

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Palm Beach Gardens,

FL

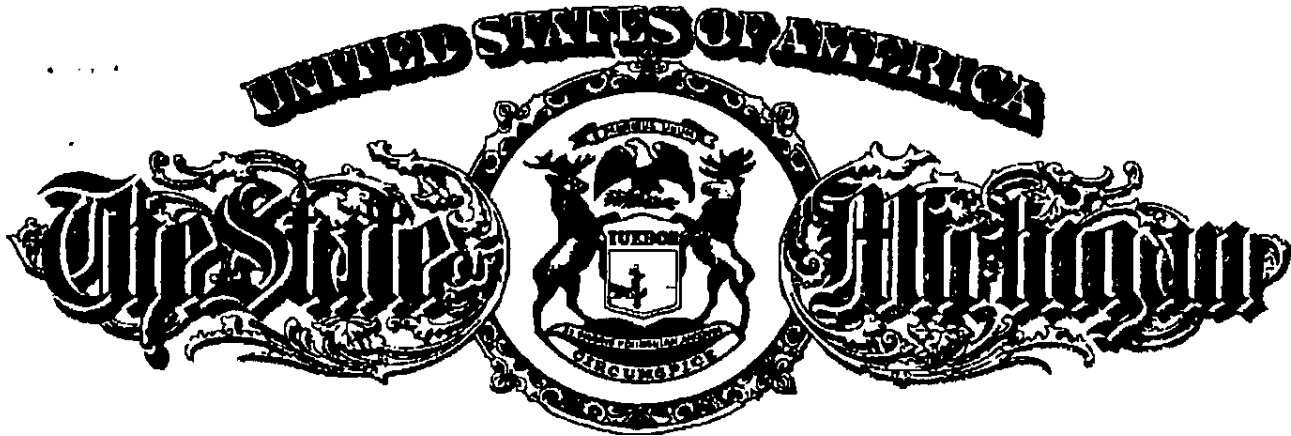
City/State/Zip

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 as provided for in Chapter 608, Florida Statutes.

Lawrence M. Rinke

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)



Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

ACTION BANDAGE LLC

was validly organized on September 26, 2008 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission
971445

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 31st day of October, 2008*

Andrew L. Mott
Bureau of Commercial Services

,Director