2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000006036

Entity Name: TEAM ORTHOPEDIC SUPPLY, INC.

FILED Jul 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1461 NORTHEAST 57 STREET 2600 NW 107 AVE

FORT LAUDERDALE, FL 33334 CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

1461 NORTHEAST 57 STREET 2600 NW 107 AVE

FORT LAUDERDALE, FL 33334 CORAL SPRINGS, FL 33065

FEI Number: 20-2205118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUSKEY, JR., J. DAVID ESQ 2850 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33311

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID J. HUSKEY JR

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete LOMBARDO, JAMES V LOMBARDO, JAMES V Name: Name:

1461 NORTHEAST 57 STREET 2600 NW 107 AVE Address: Address: CORAL SPRINGS, FL 33065 City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: Name:

LOMBARDO, JAMES V LOMBARDO, JAMES V 1461 NORTHEAST 57 STREET 2600 NW 107 AVE Address: Address:

CORAL SPRINGS, FL 33065 FORT LAUDERDALE, FL 33334 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES V. LOMBARDO **PVP** 07/23/2008

Electronic Signature of Signing Officer or Director

Date