

L01000017432

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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.

(((H01000106055 6)))

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) 205-0383

From:

Account Name : LLOYD GRANET
Account Number : 074632001025
Phone : (561) 999-9300
Fax Number : (561) 999-9400

LIMITED LIABILITY COMPANY

ComNet Medical Properties, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Lloyd Granet, Esq., 1900 NW Corporate Blvd. Suite 100 West Building, Boca Raton, FL 33431
Ph. 561-999-9300 - Fax 561-999-9400, Florida Bar No. 525431 FAX AUDIT H01000106055 6

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 OCT 10RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 OCT 10 PM 3:36

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
ComNet Medical Properties, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company
is: **1900 NW Corporate Boulevard, Suite 102 West, Boca Raton, FL 33431**


ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Harry Zuker

1900 NW Corporate Boulevard, Suite 102 West, Boca Raton, FL 33431

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, F. S.



Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable)



The Limited Liability Company is to be managed by one manager or more managers and is,
therefore, a manager - managed company.



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

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

Harry Zuker

Typed or printed name of signee

F:\wpdocs\comnet\medical properties\llc\articles.wpd

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
01 OCT 00