

Spiegel & Utrera, P.A.
Requester's Name

A01 000 0000026
Address

 City/State/Zip Phone #

Office Use Only

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

1. Loral Way MRI & Diagnostics
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time

ASAP

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

RECEIVED
01 JAN -9 AM 11:35
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

300003531593--8
-01/10/01--01057--024
*****25.00 *****25.00

FILED
01 JAN 10 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 9, 2001

SPIEGEL & UTRERA

TALLAHASSEE, FL

SUBJECT: CORAL WAY MRI & DIAGNOSTICS, LTD.
Ref. Number: A01000000026

FILED
01 JAN 10 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CORAL WAY MRI & DIAGNOSTICS, LTD. and check(s) totaling \$25.00. However, your check(s) and document are being returned for the following:

You have used the wrong form. This form is used to qualify GENERAL PARTNERSHIPS for LLP status.

Please use the attached form for LIMITED PARTNERSHIPS wishing to qualify for LLLP status.

Please also notice that on this form you must list the complete correct name of the limited partnership in Item 1. The correct complete name of this partnership is CORAL WAY MRI & DIAGNOSTICS, LTD.

The "LLLP" suffix will then be added to the end of the name AFTER the qualification is filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 901A00001205

RECEIVED
01 JAN 10 PM 1:21
DIVISION OF CORPORATIONS

**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:
CORAL WAY MRI & DIAGNOSTICS, LTD.

Insert limited partnership's Florida document number: A01000000026

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLLP
(LLP, LLLP)

3. The street address of its chief executive office: 1757 Coral Way
(if different from current recorded address): Miami, Florida 33145

4. The street address of principal office in Florida: same
(if different from above)

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:
X as of the date this document is filed with the Florida Secretary of State
or
_____ a date later than the time of filing: _____

7. The name and Florida street address of the partnership's agent for service of process:
Spiegel & Utrera, P.A.
343 Almeria Avenue
Coral Gables, Florida 33134

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 10 day of January, 2001

Signature of TWO Partners:

Rachelle Weiss
Jack A. Press, Jr.

Typed or printed names of partners signing above: Rachelle Weiss
Jack A. Press, Jr.

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

FILED
01 JAN 10 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA