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BKC

FLORIDA/FOREIGN LP/LLP

ORLANDO MRI ASSOCIATES LIMITED PARTNERSHIP

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BKC7/30/2007

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. ORLANDO MRI ASSOCIATES LIMITED PARTNERSHIP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida, must contain acceptable suffix.)

2. NEW YORK (State or Country of Formation) 3. 12/01/1995 (Date of Formation)

4. CORPORATION SERVICE COMPANY
(Name of Registered Agent for Service of Process)

5. 1201 HAYS STREET
(Florida street address for Registered Agent)

TALLAHASSEE, FLORIDA 32301

6. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Brian Courtney
Asst. V. Pres.
Signature of Registered Agent

7. 6 CORPORATE CENTER DRIVE
(Principal office address)

MELVILLE, NEW YORK 11747

8. If limited partnership is a limited liability limited partnership, check box ☐

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9. 6 CORPORATE CENTER DRIVE
(Mailing address)
MELVILLE, NEW YORK 11747

10. Name, principal office address, and mailing address of each general partner:

TIMOTHY DAMADIAN (Name)	6 CORPORATE CENTER DRIVE (Street Address) MELVILLE, NEW YORK 11747 (Mailing Address)
(Name)	(Street Address) (Mailing Address)
(Name)	(Street Address) (Mailing Address)
(Name)	(Street Address) (Mailing Address)

(Name) (Street Address)

(Mailing Address)

(Name) (Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 30 day of July 20 07.

Signature of a general partner:

Filing Fees: **$1,000.00** *($965 Filing Fee and $35 Registered Agent Fee)*
Certified Copy (optional): **$52.50**
Certificate of Status (optional): **$8.75**

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State of New York
Department of State } ss:

I hereby certify, that ORLANDO MRI ASSOCIATES LIMITED PARTNERSHIP a New York Limited Partnership, filed a Certificate of Limited Partnership pursuant to the Partnership Law, on 12/01/1995, and that the Limited Partnership is existing so far as shown by the records of the Department.

***

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of July two thousand and seven.

Daniel Shapiro
Special Deputy Secretary of State

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