Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

: NASON, YEAGER, GERSON, WHITE & LIOCE, P.A. Account Name

Account Number: 073222003555 : (561)686-3307 Phone : (561)686-5442 Fax Number

LIMITED LIABILITY COMPANY

Radcoat Systems, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

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ARTICLES OF ORGANIZATION OF PELICAN MEDICAL, L.L.C.

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is:

PELICAN MEDICAL, L.L.C.

ARTICLE II ADDRESS

The mailing address of the principal office is:

1191 N. Federal Highway PMB 103 Delray Beach, FL 33483

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

<u>ARTICLE IV</u> <u>MANAGEMENT</u>

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Members and is, therefore, a member-managed company.

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CRETARY OF STATE
LABASSEE, FLORIDA

Manuel Farach, Esq. (FL Bar No. 612138) Nason, Yeager, Gerson, White & Lioce, P.A. 1645 Palm Beach Lakes Blvd., Suite 1200 West Palm Beach, FL 33418 Phone: (561) 686-3307

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ARTICLE V

ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 3 day of August, 2000.

Manuel Farach, Authorized Representative

Members

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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:

PELICAN MEDICAL, L.L.C.

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

Manuel Farach 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401 OD AUG -3 PM 2: 56
SECRETARY OF STATE
TALLAMACSEE, FLORIDA

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Manuel Farach, Registered Agent

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Manuel Farach, Esq. (FL Bar No. 612138) Nason, Yeager, Gerson, White & Lioce, P.A. 1645 Palm Beach Lakes Blvd., Suite 1200 West Palm Beach, FL 33418 Phone: (561) 686-3307