

L01000000 965

LAW OFFICE
LEE SACKS

A PROFESSIONAL CORPORATION
100 WILSHIRE BOULEVARD
SUITE 1300

SANTA MONICA, CALIFORNIA 90401

TELEPHONE (310) 451-3113

FAX (310) 451-0089

OFFICE@SACKSAPCLAW.COM

January 10, 2001

LEE SACKS*
CHRISTINE M. ARDEN*

*ALSO ADMITTED IN NEW YORK
*ALSO ADMITTED IN ARIZONA AND ILLINOIS

OF COUNSEL
DENNIS HOLAHAN

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

900003538369--5
-01/16/01--01097--003
****125.00 ****125.00

Re: Articles of Organization - FAU MRI Radiology Associates, LLC

Dear Sir/Madam:

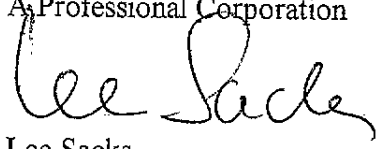
Enclosed for filing are the Articles of Organization for the above-referenced LLC, together with two copies for conforming and returning to our office in the enclosed self-addressed, stamped envelope. In addition, enclosed is the filing fee in the amount of \$125.00, to cover the following items:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Fee for Designation of Registered Agent

Thank you for your assistance and cooperation in this matter.

Very truly yours,

LAW OFFICES OF LEE SACKS
A Professional Corporation


Lee Sacks

FILED
01 JAN 16 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LS:rb
Enclosures

cc: FAU MRI Radiology Associates, LLC

sc

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: FAU MRI RADIOLOGY ASSOCIATES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
3848 FAU Boulevard, Suite 200, 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:

Fred L. Steinberg, M.D.

Name

3848 FAU Blvd., Suite 200

Florida street address (P.O. Box NOT acceptable)
Boca Raton, FL 33431

City, State, and Zip

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..

Fred L. Steinberg
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.

(An additional article must be added if an effective date is requested)

Fred L. Steinberg
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FRED L. STEINBERG

Typed or printed name of signee

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JAN 16 AM 9:39

FILED