



THE UNITED STATES
CORPORATION
COMPANY

L010000002709

ACCOUNT NO. : 072100000032

REFERENCE : 030213 7254338

AUTHORIZATION :

Patricia Piguet

COST LIMIT : \$ 155.00

ORDER DATE : February 20, 2001

ORDER TIME : 8:48 AM

ORDER NO. : 030213-005

500003744905--0

CUSTOMER NO: 7254338

CUSTOMER: Mr. Ted Levitt
Diagnostic Imaging
Association, LLC
20533 Biscayne Blvd.
Suite 4-n139
Miami, FL 33180

DOMESTIC FILING

NAME: DIAGNOSTIC IMAGING
ASSOCIATION, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull - EXT. 1115
EXAMINER'S INITIALS:

RECEIVED
01 FEB 21 AM 9:50
DIVISION OF CORPORATION

JB
2-21-01
01 FEB 21 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVAL
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

Diagnostic Imaging Association, LLC.

ARTICLE II - Address - The principal place of business and mailing address is:

20533 Biscayne Blvd., Suite #4-N139
Aventura, FL 33180

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

Olivia Richardson

Name

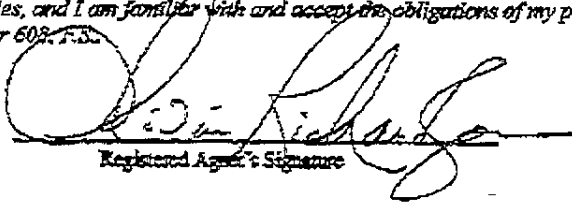
20533 Biscayne Blvd., Suite #4-N139

Florida Street Address

Aventura, FL 33180

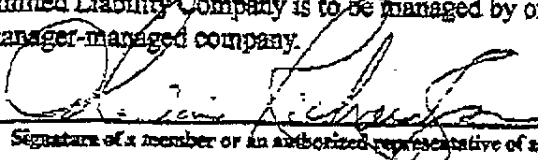
City, State, and Zip

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.


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

Olivia Richardson

Typed or printed name of signor

01 FEB 21 AM 10:52
RECEIVED
AND
FILED
CLERK OF DISTRICT COURT
IN THE STATE OF FLORIDA