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ACCOUNT NO. : 072100000032

REFERENCE : 082236 4306827

AUTHORIZATION : *Patricia Pigitt*

COST LIMIT : \$ 155.00

ORDER DATE : March 19, 2001

ORDER TIME : 10:32 AM

ORDER NO. : 082236-015

900003877079--9

CUSTOMER NO: 4306827

CUSTOMER: Ms. Judy Hoodiman
Abrams Anton, P.a.

2021 Tyler Street

Hollywood, FL 33022

DOMESTIC FILING

NAME: IDEAL MEDICAL LEASING LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea C. Mabry - EXT.

EXAMINER'S INITIALS:

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAR 19 AM 11:30
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TALLAHASSEE FLORIDA

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ARTICLES OF ORGANIZATION
OF
IDEAL MEDICAL LEASING LLC

THE UNDERSIGNED, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Florida Limited Liability Company (the "Company") under the laws of the State of Florida does set forth the following:

1. **NAME**

The name of the Company is:

IDEAL MEDICAL LEASING LLC

2. **PERIOD OF DURATION**

In accordance with Section 608.409(1) of the Florida Limited Liability Company Act ("Act"), the term of existence shall begin the date these Articles are filed and its duration shall be perpetual, unless other dissolved or terminated by the unanimous written agreement of all members or pursuant to an event described in paragraph 7 of these Articles of Organization.

3. **PURPOSE**

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a Limited Liability Company organized and existing by virtue of such laws.

4. **MAILING AND STREET ADDRESS OF COMPANY**

The mailing and street address of the place of business in Florida for the

Prepared by:
Alan B. Cohn, Esq. (Bar No. 434698)
2021 Tyler Street
Hollywood, FL 33020

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Company is:

*2940 N.E. 188th Street, #111
Aventura, Florida 33180*

5. **REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent in Florida for the

Company is:

*Alan B. Cohn, Esq.
Abrams Anton P.A.
2021 Tyler Street
Hollywood, Florida 33020*

6. **ADMISSION OF ADDITIONAL MEMBERS**

Pursuant to Section 608.4232 of the Act, the Company may admit additional members upon the affirmative vote of a majority in interest of the members holding membership interests of the Company, either in attendance at a duly called meeting of the members at which a quorum exists or by written consent of the members of the Company. Any new member which is approved by the members of the Company as set forth herein shall become a member of the Company upon payment of the contribution to the capital of the Company as established from time to time by the members, and upon such member's agreement to comply with these Articles of Organization, its regulations or guidelines as the members may from time to time determine, to their sole discretion.

7. **CONTINUITY OF BUSINESS**

Upon death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company, the business of the Company shall not be continued and the Company shall be dissolved, unless the consent of all remaining members of the Company is obtained.

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8. **MANAGEMENT**

The Company is to be managed by a Managing Member or Managing Members. The names and addresses of such Managing Members who are to serve as Managing Members until the first annual meeting of members or until their successors are elected and qualified are:

***JMLS FAMILY LTD.
1112 Weston Road, #226
Weston, Florida 33326***

***SP FAMILY LTD.
2940 N.E. 188th Street, #111
Aventura, Florida 33180***

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9. **RIGHT OF ASSIGNEE TO BECOME A MEMBER**

An assignee of a member's interest in the Company may become a member of the Company and acquire the rights and powers and be subject to the restrictions and liabilities of a member of the Company, upon the affirmative vote of a majority in interest of the members holding membership interests of the Company (excluding the member seeking to transfer his or her interest in the Company) either in attendance at a duly called meeting of the members at which a quorum exists or by written consent of the members of the Company. The rights of the assignee shall be subject to the regulations, if any, and/or such other documents or agreements governing the operation of the Company as may be entered into from time to time, provided such assignment and admission of such assignee as a member complies with the terms and conditions of the regulations of the Company, if any and/or such other documents or agreements governing the operation of the Company as may be entered into from time to time.

10. **RETURN OF CAPITAL**

No member shall have the right to demand the return of his or its contribution to capital except as provided in the Company's regulations or operating agreement, if any, then in existence.

11. **AMENDMENT TO ARTICLES OF ORGANIZATION**

Members may adopt, alter, amend or repeal any provision of the Articles of the Organization upon the affirmative vote of a majority in interest of the members of the Company which vote is taken at a duly called meeting of the members at which a quorum is present, or by written consent of the members of the Company.

12. **REGULATIONS**

Pursuant to Section 608.423(1) of the Act, the members of the Company may adopt, alter, amend or repeal regulations or any provision thereof, upon the affirmative vote of a majority in interest of the members of the Company in attendance at a meeting of the members duly called at which a quorum exists, or by written consent of the members of the Company.

13. **AUTHORIZED REPRESENTATIVE**

The name and address of the Authorized Representative signing these Articles is:

*Alan B. Cohn, Esq.
2021 Tyler Street
Hollywood, Florida 33020*

IN WITNESS WHEREOF, the undersigned as Authorized Representative has executed these Articles of Organization this 16 day of March, 2001.

Printed Name of Witness

Printed Name of Witness



Alan B. Cohn,
Authorized Representative

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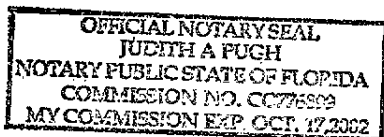
STATE OF FLORIDA)
COUNTY OF BROWARD)

ON THIS 16 day of March, 2001, before me
personally appeared ALAN B. COHN, the Authorized Representative of
IDEAL MEDICAL LEASING LLC,, a Florida Limited Liability Company,
who is personally known to me to be the individual described in and
who executed the foregoing or who has produced
N/A as identification, and he acknowledged
before me that he executed the same for the purposes expressed
therein.

IN WITNESS WHEREOF, I have hereunto set my hand and seal in
the county and state aforesaid.

Judith A. Pugh
Notary Public, State of Florida

My Commission Expires:



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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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is ***IDEAL MEDICAL LEASING LLC***
2. The name and address of the registered agent and office is:

***Alan B. Cohn, Esq.
ABRAMS ANTON P.A.
2021 Tyler Street
Hollywood, Florida 33020***

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.



Alan B. Cohn, Esq.
Registered Agent

Dated: March 16, 2001

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