Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: SMALL BUSINESS RESOURCES, INC.

Account Number : 110232002057

: (407)298-4646

Fax Number

: (407)297-0588

AL

LIMITED LIABILITY COMPANY

ProMed Diagnostics, LLC

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION PROMED DIAGNOSTICS, LLC

A FLORIDA LIMITED LIABILITY COMPANY

This Limited Liability Company formed pursuant to Chapter 608 of the Florida Statutes, adopted the following Articles of Organization for such company:

ARTICLE I

02 FEB

ECRETARY OF STAT LLAHASSEE, FLORI

NAME:

The name of the Limited Liability Company is:

ProMed Diagnostics, LLC

ARTICLE II

EFFECTIVE DATE:

The effective date of these Articles of Organization and the start date of this Limited Liability Company is:

January 31, 2001

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ARTICLES OF ORGANIZATION PROMED DIAGNOSTICS, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE III

ADDRESS:

The principal office address is:

Main Street Titusville, FL 32780

The principal mailing address is:

P. O. Box 6059 Titusville, FL 32782

ARTICLE IV

REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

The name of the registered agent is:
International Business Incorporators, Inc.

The Florida street address of the registered agent is:

8108 S.W. 103rd Avenue Miami, FL 33173 SECRETARY OF STATE TALLAHASSEE, FLORIDI

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ARTICLES OF ORGANIZATION PROMED DIAGNOSTICS, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE IV (continued)

ACCEPTANCE OF REGISTERED AGENT APPOINTMENT

First - That ProMed Diagnostics, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the city of Titusville, state of Florida, has named International Business Incorporators, Inc., located at 8108 S.W. 103rd Avenue, in the city of Miami, state of Florida, 33173, as its agent to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, we hereby agree to act in this capacity, and we further agree to comply with the provision of all statutes relative to the proper and complete performance of our duties. We are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 608, Florida Statutes.

Signature

Date