

LO2000013305

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H02000145774 4))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

RECEIVED
02 MAY 30 PM 4: 17
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

NORTH FLORIDA CYCLOTRON CENTER, LLC

Name Availability	
Document Examiner	DCC
Updater	DCC
Updater Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

Certificate of Status	0
Certified Copy	1
Page Count	034
Estimated Charge	\$155.00

FILED
02 MAY 30 PM 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LO2000013305

H02000145774

**ARTICLES OF ORGANIZATION
OF
NORTH FLORIDA CYCLOTRON CENTER, LLC**

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as the same may from time to time be amended (the "Act").

**ARTICLE I
NAME**

The name of this limited liability company (the "Company") is:

NORTH FLORIDA CYCLOTRON CENTER, LLC

**ARTICLE II
ADDRESS**

The initial mailing address of the Company is P. O. Box 19919, Jacksonville, Florida 32245. The initial street address of the principal office of the Company is 1895 Kingsley Avenue, Suite 600, Orange Park, Florida 32073.

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name and street address of the initial registered office of the Company for service of process in the State of Florida is as follows:

**Gresham R. Stoneburner
One Independent Drive, Suite 2000
Jacksonville, Florida 32202**

02 MAY 30 PM 4: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Prepared by Gresham R. Stoneburner, Esquire
Stoneburner Derry & Simpson P.A.
One Independent Drive, Suite 2000
Jacksonville, Florida 32202
(904) 354-8989
Florida Bar No. 02021166

H02000145774

H02000145774

**ARTICLE IV
MANAGEMENT**

The Company is to be a member-managed Company.

**ARTICLE V
OPERATING AGREEMENT**


The members shall have the power to adopt, alter, amend or repeal an operating agreement as contemplated by the Act (the "Operating Agreement"). The Operating Agreement adopted by the member(s) may be amended, repealed, or altered or a new Operating Agreement may be adopted, from time to time by the member(s).

**ARTICLE VI
LIMITED LIABILITY**

No member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned have duly executed these Articles of Organization as of this 30th day of May, 2002.

NORTH FLORIDA CYCLOTRON CENTER, LLC


By: A member

02 MAY 30 PM 4: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H02000145774

H02000145774

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:
NORTH FLORIDA CYCLOTRON CENTER, LLC
- 2. The name and the Florida street address of the Registered Agent are:

Gresham R. Stoneburner
One Independent Drive, Suite 2000
Jacksonville, FL 32202

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.

Signature of Registered Agent


Gresham R. Stoneburner

UN:\Stonamer\gonyon\NoFla Cyclotron\Articles of organization - It 5-7-02 370.doc

Prepared by Gresham R. Stoneburner, Esquire
Stoneburner Berry & Simonds P.A.
One Independent Drive, Suite 2000
Jacksonville, Florida 32202
(904) 354-8588
Florida Bar No. 0303186

H02000145774

02 MAY 30 PM 4:21
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA