

# LO2 0000/6820

Florida Department of State  
Division of Corporations  
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To:

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Fax Number : (850) 205-0383

From:

Account Name : MOORE & MENKHAUS, P.A.  
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Phone : (561) 394-7910  
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DIVISION OF CORPORATIONS

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**LIMITED LIABILITY COMPANY**

**MRI LEASING GROUP, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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JR

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: MRI LEASING GROUP, LLC


**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 2151 45th Street, Suite 104, West Palm Beach, FL 33407.

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

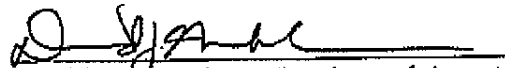
The name and the Florida street address of the registered agent are David J. Menkhaus, 2424 North Federal Hwy., Suite 456, Boca Raton, FL, 33431, FL.

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..

  
(Signature)

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by a Board initially comprised of two (2) managers and is, therefore, a manager-managed company.

  
David J. Menkhaus, Registered Agent

(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.)

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