

LO300000 7547

Jeffrey Laporte

(Requestor's Name)

3101 W. Hollandale Beach Blvd

(Address)

Suite 101

(Address)

Pembroke Park, FL 33009 (954) 983-8382

(City/State/Zip/Phone #)



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WAIT



MAIL

(Business Entity Name)

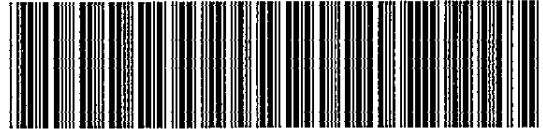
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L & L MOBILE Diagnostic, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

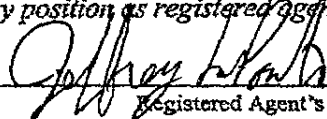
3101 W. Hallandale Bch Blvd, suite 101, Hallandale, FL

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

The name and the Florida street address of the registered agent are:

JEFFREY LAPORTE
Name
3101 W. Hallandale Bch Blvd, suite 101
Florida street address (P.O. Box NOT acceptable)
Hallandale, FL, 33009
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

(An additional article must be added if an effective date is requested)


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.)

JEFFREY LAPORTE
Typed or printed name of signer

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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ARTICLE IV – MANAGING MEMBERS:

The name and mailing address of the managing members of this Limited Liability Company:

1. Christopher Liva
Name
3101 W. Hallandale Bch Blvd, suite 101
Florida street address
Hallandale, FL 33009
City, State, and Zip
2. Johnathan T. Liva
Name
3101 W. Hallandale Bch Blvd, suite 101
Florida street address
Hallandale, FL 33009
City, State, and Zip
3. _____
Name

Florida street address

City, State, and Zip

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