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# Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

From: Nery C. Toledo, Legal Assistant Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.

Account Number : 075471001363 ; (305) 374-560Õ Phone Fax Number : (305)374-5095

## LIMITED LIABILITY COMPANY

**OUTSTANDING MRI ASSOCIATES I, LLC** 

Certificate of Status	0
Certified Copy	I
Page Count	01
Estimated Charge	\$155.00

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### ARTICLES OF ORGANIZATION OF OUTSTANDING MRI ASSOCIATES I, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is:

### OUTSTANDING MRI ASSOCIATES I, LLC

ARTICLE II: - Address

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

1811 North Dale Mabry Highway Tampa, Florida 33618

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

American Information Services, Inc. One Southeast Third Avenue Suite 2800 Miami, Florida 33131

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.

American Information Services, Inc.

C. Toledo, Assistant Secretary

Registered Agent

Signed and dated this \_\_\_\_ day of March, 2003.

Marshall R. Burack, Esq. Authorized Representative of a Member