

L03000020857

Florida Department of State
Division of Corporations
Public Access System

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.

(((H03000210965 7)))

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 : THE FARR LAW FIRM
Account Number : 103654001666
Phone : (941) 639-1158
Fax Number : (941) 639-0028

LIMITED LIABILITY COMPANY
SHARPER IMAGING DIAGNOSTIC RADIOLOGY CENTER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

03 JUN 10 AM 11:20 RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing

Public Access Help

JB
6-10-03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name:

The name of the Limited Liability Company is:

SHARPER IMAGING DIAGNOSTIC RADIOLOGY CENTER, LLC

ARTICLE II — Address:

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

**SHARPER IMAGING DIAGNOSTIC RADIOLOGY CENTER, LLC
2500 Harbor Boulevard
Port Charlotte, FL 33949-3548**

Mailing Address:

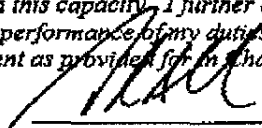
**c/o David A. Holmes, Esquire
Farr, Farr, Emerich, Sifrit, Hackett & Carr, P.A.
Post Office Drawer 511447
Punta Gorda, Florida 33951-1447**

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

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

**David A. Holmes, Esquire
Farr, Farr, Emerich, Sifrit,
Hackett and Carr, P.A.
99 Nesbit Street
Punta Gorda, Florida 33950-3636**

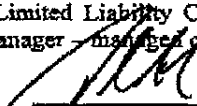
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.



David A. Holmes, Registered Agent

ARTICLE IV — Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.



David A. Holmes, Authorized Representative of a member

David A. Holmes
Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

03 JUN 10 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED