

L03000037440

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.

((H03000287936 6)))

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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

03 OCT - 1 PM 12: 26
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
AND
FILED

LIMITED LIABILITY COMPANY

diagnostic health institute, llc

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

03 OCT - 1 PM 12: 08
RECEIVED
DIVISION OF CORPORATION

Handwritten signature/initials

TOTAL P.02

HOO-

H030000287936

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name of Limited Liability Company:
Diagnostic Health Institute, LLC

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:
Address: 6505 Racket Club Drive

City, State & Zip: Lauderdale, FL 33319

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

Kevin H. Fabrikant, Esq.
Address (P.O. Box NOT Acceptable)
1250 E. Hallandale Beach Blvd., Suite 710
City, State, Zip
Hallandale Beach, FL 33009

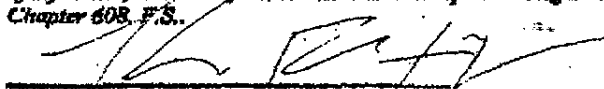
ARTICLE IV - Liability

No liability may be incurred on behalf of the LLC without the consent of all members.

ARTICLE V - Corporate Existence

This LLC shall not be dissolved upon the death, dissolution, or bankruptcy of a member but shall be continued by the remaining members.

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

Date Sept. 30, 2003

Article IV - Management (Check box if applicable.)

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



Signature of a member or an authorized representative of a member.
In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Debra Bland

Typed or printed name of signee

HOO-

H030000287936

03 OCT - 1 PM 12:26

FILED