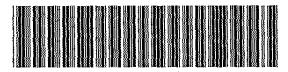
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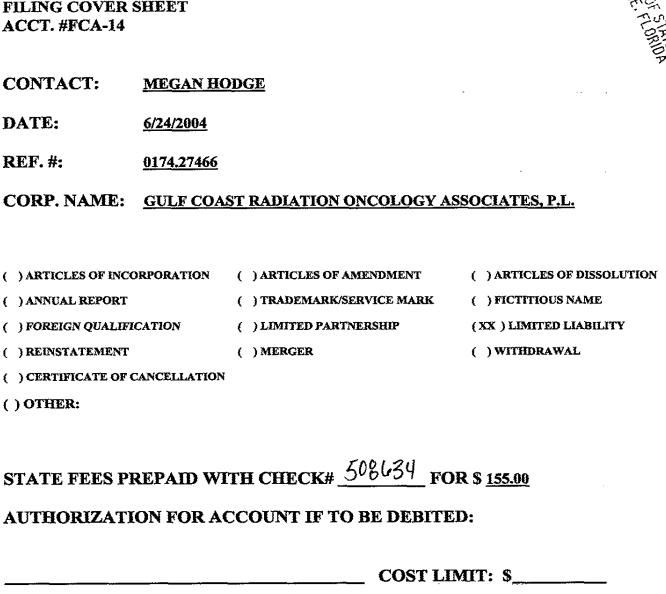


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CORPDIRECT AGENTS, INC. (formerly CCRS) 103 N. MEDIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET



( ) CERTIFICATE OF GOOD STANDING ( ) PLAIN STAMPED COPY

Examiner's Initials

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( XX ) CERTIFIED COPY

( ) CERTIFICATE OF STATUS

## ARTICLES OF ORGANIZATION

GULF COAST RADIATION ONCOLOGY ASSOCIATES, P.L.,

The business and affairs of the Limited Liability Company shall be conducted under the name of:  $^{GULF\,CO_{AST}\,RADI_{ATION}\,ONCOLOG_{Y}}_{ASSOCI_{ATES,\,P.L.}}$ The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

401 Manatee Avenue East

registered office of the Limited Liability Company and its initial registered agent shall be: Bradenton, FL 34208

240 S. Pineapple Avenue 10th Floor Sarasota, FL 34236

MANAGEMENT AND POWERS

nagers

v.I

the Limited Liability Company shall be managed by one or more

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the day of June, 2004.

WITNESSES:

Print Name C.H. AMAR INALSTNGH

PRANAB RAY, M.D.

Prior Name BENJAMIN R. HANAN

"MANAGER"

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

GULF COAST RADIATION ONCOLOGY ASSOCIATES, P.L.

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

Benjamin R. Hanan 240 S. Pineapple Avenue 10<sup>th</sup> Floor Sarasota, FL 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: 423 04

"REGISTERED AGENT"