

FROM

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Florida Department of State  
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Account Name : FOLEY & LARDNER OF TAMPA  
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**LIMITED LIABILITY COMPANY**

**Prestige Imaging at University Groves, LLC**

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

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## ARTICLES OF ORGANIZATION

OF

### PRESTIGE IMAGING AT UNIVERSITY GROVES, LLC

ARTICLE I - Name. The name of this limited liability company is Prestige Imaging at University Groves, LLC (the "Company"), and it shall be formed as a limited liability company under Chapter 608 of the laws of the State of Florida.

ARTICLE II - Address. The mailing address and street address of the principal office of the Company is:

Principal Office Address:

1880 Arlington Street, Suite 204  
Sarasota, Florida 34239

Mailing Address:

P.O. Box 25428  
Sarasota, Florida 34277

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

Name: F&L Corp.

Address: One Independent Drive  
Suite 1300  
Jacksonville, Florida 32202.

*Having been named Registered Agent and designated to accept service of process for the above stated limited liability company, at the place designated herein, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of such duties, and is familiar with and accepts the obligations of the position of registered agent as provided for in Chapter 608, Florida Statutes.*

F&L CORP.

By: 

Name: Martin A. Traber

Title: Vice President

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ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Richard J. Lichtenstein, M.D.  
1800 Arlington Street, Suite 204  
Sarasota, Florida 34239


MGR

Marcel F. Srur, M.D.  
1800 Arlington Street, Suite 204  
Sarasota, Florida 34239

MGR

Randall I. Brodsky, M.D.  
1800 Arlington Street, Suite 204  
Sarasota, Florida 34239

REQUIRED SIGNATURE:

  
(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).

RICHARD J. LICHTENSTEIN M.D.  
(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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