

LO4000056325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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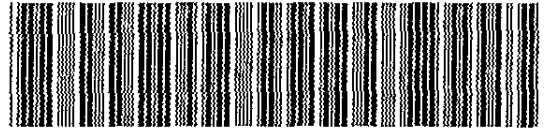
(Business Entity Name)

(Document Number)

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OK

Emerald Hills Professional Park
4700-D Sheridan Street
Hollywood, Florida 33021
July 26, 2004

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Reference: Imaging Teknix, LLC.

Dear Sir or Madam:

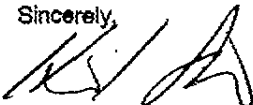
The enclosed Articles of Organization for the limited liability corporation Imaging Teknix, LLC are submitted for filing. Please return all correspondence concerning this matter to the following:

Herbert L. Shick, M.D.
Emerald Hills Professional Center
4700-D Sheridan Street
Hollywood, Florida 33021

For further information concerning this matter, please call: (954) 962-4707. Enclosed is a check for One Hundred Fifty Five Dollars (\$155.00) for the following: \$100.00 filing fee for Articles of Incorporation; \$25.00 fee for designation of Registered Agent; and \$30.00 fee for a certified copy of the registered Articles of Organization.

Thank you for your assistance in this matter.

Sincerely,



Herbert L. Shick, M.D.

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ARTICLES OF ORGANIZATION
IMAGING TEKNIKX, LLC

ARTICLE I: Name

The name of the limited liability company is Imaging Teknix, LLC.

ARTICLE II: Address

The mailing address and street address of the principal office of the limited liability company is:

Principal Office Address:
4251 Mangrum Court
Hollywood, Florida 33021

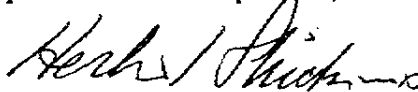
Mailing Address:
4251 Mangrum Court
Hollywood, Florida 33021

ARTICLE III: Registered Agent, Registered Office, and Registered Agent's Signature

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

Herbert L. Shick, M.D.
4251 Mangrum Court
Hollywood, Florida 33021.

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, Florida Statutes.


Herbert L. Shick, M.D.

SECRET
TALLAHASSEE, FLORIDA

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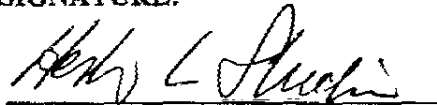
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ARTICLE IV: Managing Member

The name and address of each Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGRM	Herbert L. Shick, M.D. 4251 Mangrum Court Hollywood, Florida 33021

REQUIRED SIGNATURE:


Herbert L. Shick, M.D.
Managing 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.)

Herbert L. Shick, M.D.

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