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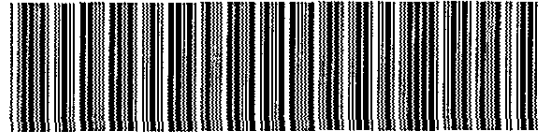
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boca Raton Open MRI LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael R. D. Mento
(Name of Person)

BOCA RATON OPEN MRI, LLC
(Firm/Company)

644 Woodlawn Ave
(Address)

Brielle NJ 08730
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael R. D. Mento at (732) 233-2441
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
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(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
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|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Boca Raton Open MRI LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on _____ and assigned
document number 606000005364.

SECOND: This amendment is submitted to amend the following:

Change mailing address to: 644 Woodlawn Ave Brielle NJ
08730

Remove: Certified Investments INC. as managing member
they were replaced by Michael R. Dimento

Dated 7 AUG, 2007.



Signature of a member or authorized representative of a member

Michael R. Dimento

Typed or printed name of signee

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