

FEB-17-2006 13:19

GRAY ROBINSON

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From:
Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO
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FLORIDA/FOREIGN LIMITED LIABILITY CO

Cancer Institute of Florida, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is: Cancer Institute of Florida, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 661 E. Altamonte Drive, Altamonte Springs, Florida 32701.

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

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

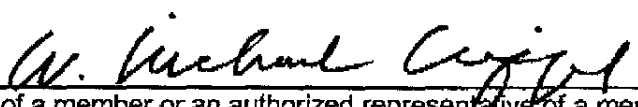
W. Michael Clifford
GrayRobinson, P.A.
301 E. Pine Street, Suite 1400
Orlando, Florida 32801

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

Article IV - Management:

The Limited Liability Company is to be managed by its members and is, therefore, a member - managed limited liability company.


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.)

W. Michael Clifford, authorized representative of member
Typed or printed name of signee

FILING FEES:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)