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TALLAHASSEE, FLORIDA

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LISA BRADEN, P.A.
4623 FOREST HILL BLVD., SUITE 111
WEST PALM BEACH, FLORIDA 33415
E-Mail: lisa@lisabraden.com

Website: www.lisabraden.com
www.apsflorida.com

Telephone: (561) 641-1888

October 9, 2007

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

Re: Nassau Medical Imaging Associates, LLC
Articles of Organization


Dear Sirs:

Please find enclosed the original and one copy of the Articles of Organization for the above mentioned along with a check in the amount of \$155.00 for the filing of this document. This check represents \$100.00 filing fee; \$25.00 Designation of Registered Agent; and \$30.00 certified copy.

After filing this documents, please return a certified copy to our office.

If you have any questions, please give our office a call.

Sincerely yours,


Lisa Braden

enclosures

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

FOR

Nassau Medical Imaging Associates, LLC

The undersigned being all of the members and organizers to these Articles of Organization do hereby form a Limited Liability Company under the provisions of the Florida Limited Liability Company Act.

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

The name of this limited liability company (hereinafter called "Company") shall be Nassau Medical Imaging Associates, LLC.

ARTICLE II - PURPOSE

The purpose of this Company shall be generally to engage in the practice of medicine.

ARTICLE III - MANAGEMENT OF THE BUSINESS

The business shall be managed by Nassau Medical Imaging Associates, LLC.

ARTICLE IV - MEMBERSHIP

The members of the Company shall be:

Harris Freed
95152 Elderberry Lane
Fernandina Beach, FL 32034

Randy A. Sag
862399 N. Hampton Club Way
Fernandina Beach, FL 32034

ARTICLE V - TERM OF EXISTENCE

The existence of the Company shall commence as of the date and time upon which

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ARTICLE VI - MAILING ADDRESS AND STREET ADDRESS OF THE COMPANY


1250 South 18th Street
Fernandina Beach, FL 32034

4623 Forest Hill Blvd, Ste 111
West Palm Beach, FL 33415

7th day of September, 2007.

STATE OF FLORIDA)
COUNTY OF Nassau)
PALM BEACH)

Subscribed, sworn to and acknowledged before me by Harris Freed who is
☒ personally known to me or
☐ presented his driver's license number _____, issued by the State
 of Florida as his personal identification
 on this 7 day of September, 2007.


 WANDA J. HENDERSON
MY COMMISSION #DD265952
EXPIRES: JAN 17, 2008

Wanda J. Henderson
Notary Public
State of Florida at Large

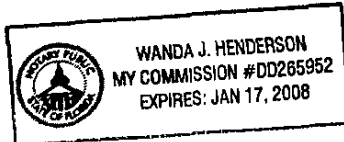

Randy A. Sag

STATE OF FLORIDA)
COUNTY OF Nassau)
PALM BEACH)

Subscribed, sworn to and acknowledged before me by Randy A. Sag who is
☒ personally known to me or
☐ presented his driver's license number _____, issued by the State
of Florida as his personal identification
on this 7 day of September, 2007.


Notary Public
State of Florida at Large

My Commission Expires:



ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

Pursuant to the provisions of Florida Statutes Section 608.415, the undersigned does hereby accept her appointment as registered agent on whom process may be served within the State of Florida and agrees to act in this capacity for the limited liability company named in the foregoing Articles of Organization. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned duties, and is familiar with and accepts the obligations of her position as registered agent.

On this 5th day of October, 2007


Lisa Braden

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