

W08000007929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

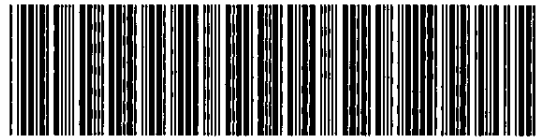
Special Instructions to Filing Officer:

W080000000123

Office Use Only

EFFECTIVE DATE

1-14-08



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12/31/07--01009--022 **160.00

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07 DEC 31 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/31/07
DBruce

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AEI Diagnostic Imaging, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

William Atkinson, DDS

(Name of Person)

AEI Real Estate Holding, Inc

(Firm/Company)

9522 Green Pointe Drive

(Address)

Tampa, Florida 33626

(City/State and Zip Code)

For further information concerning this matter, please call:

LaKesha Flowers c/o JW Consultants at (678) 252-2137
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2008

WILLIAM ATKINSON, DDS
9522 GREEN POINTE DRIVE
TAMPA, FL 33626

SUBJECT: AEI DIAGNOSTIC IMAGING, LLC
Ref. Number: W08000000123

We have received your document for AEI DIAGNOSTIC IMAGING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 31, 2007. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 808A0000008

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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EFFECTIVE DATE _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AEI Diagnostic Imaging, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

AEI Diagnostic Imaging, LLC c/o AEI Real Estate Holding, Inc
2881 Telstar Avenue
Orlando, FL 32805

Mailing Address:

AEI Diagnostic Imaging, LLC
9522 Green Pointe Drive
Tampa, Florida 33626

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

AEI Real Estate Holding, Inc

Name

2881 Telstar Avenue

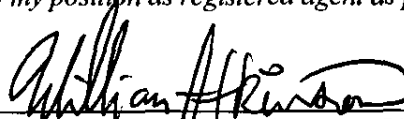
Florida street address (P.O. Box **NOT** acceptable)

Orlando, FL 32805

City, State, and Zip

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TALLAHASSEE, FLORIDA

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 (REQUIRED)

EFFECTIVE DATE _____

(CONTINUED)

Page 1 of 2

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

AEI Real Estate Holding, Inc

2881 Telstar Avenue

Orlando, FL 32805

MGRM

AEI Real Estate Holding, Inc

2881 Telstar Avenue

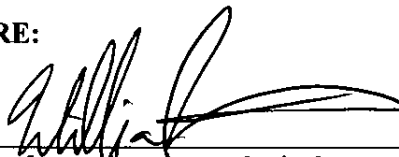
Orlando, FL 32805

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 14, 2008. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

William Atkinson, DDS

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 DEC 31 PM 4:11

FILED

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)