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(City/State/Zip/Phone #)

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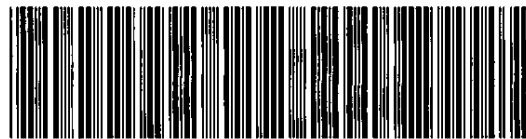
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(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 28 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: South Florida Radiation Oncology Jupiter, 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:

Monica Wallace

Name of Person

McDermott Will & Emery

Firm/Company

227 W. Monroe, Suite 4400

Address

Chicago, IL 60606

City/State and Zip Code

mwallace@mwe.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monica Wallace

Name of Person

at ( 312 ) 984-7757

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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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2010 JUL 27 PM 12:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
SOUTH FLORIDA RADIATION ONCOLOGY JUPITER, LLC**

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The undersigned, being authorized to execute and file these Articles of Organization of South Florida Radiation Oncology Jupiter, LLC (the "Limited Liability Company"), hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is:

**South Florida Radiation Oncology Jupiter, LLC**

**ARTICLE II — Address:**

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

3343 State Road 7  
Wellington, Florida 33449

**ARTICLE III — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV — Registered Agent:**

The name and address of the registered agent for service of process in the state shall be:

Ravi Patel  
3343 State Road 7  
Wellington, Florida 33449

**ARTICLE V — Management:**

The Limited Liability Company will be a manager-managed company.

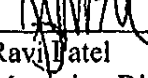
**ARTICLE VI — Effective Date:**

These Articles of Organization shall be effective upon filing.

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IN WITNESS WHEREOF, the undersigned, as an Authorized Representative, has executed the foregoing Articles of Organization as of this 20 day of July, 2010.

**South Florida Radiation Oncology Jupiter,  
LLC, a Florida limited liability company**

By:   
Name: Ravin Patel  
Title: Managing Director

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TALLAHASSEE, FLORIDA

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

**SOUTH FLORIDA RADIATION ONCOLOGY JUPITER, LLC**

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 608, Florida Statutes.*

  
Name: Ravi Patel

Dated: July 20, 2010