LICOUD	05624	
(Requestor's Name) (Address)	300189631963	
(Address) (City/State/Zip/Phone #)	01/14/1101002005 **125.00	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	RECEIVED 11 JAN 1,3 PH 4: 38 DEPARTMENT OF STALE DIVISION OF COMPORATION TALLAHASSEE, FLORIDA	
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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE **TALLAHASSEE, FL 32301** 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONT	ACT:	<u>Kim Weider</u>	<u>ibach</u>

DATE: 1/13/11

REF. #: 000177.140305

CORP.NAMER ROBINESIEMOBILEDIAGNOSTICS, LUC

- () ARTICLES OF INCORPORATION
- () ANNUAL REPORT
- () FOREIGN QUALIFICATION
- () REINSTATEMENT
- () CERTIFICATE OF CANCELLATION
- () OTHER:

- () ARTICLES OF AMENDMENT
 - () TRADEMARK/SERVICE MARK
 - () LIMITED PARTNERSHIP
 - () MERGER

- () ARTICLES OF DISSOLUTION
- () FICTITIOUS NAME

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() WITHDRAWAL

STATE FEES PREPAID WITH CHECK	# 53815	FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$_____

() CERTIFIED COPY () CERTIFICATE OF GOOD STANDING

() CERTIFICATE OF STATUS

Examiner's Initials

(YADD COPY



ARTICLES OF ORGANIZATION OF ROBIN'S NEST MOBILE DIAGNOSTICS, LLC

The undersigned, being authorized to execute and file these Articles of Organization of Robin's Nest Mobile Diagnostics, LLC (the "Limited Liability Company"), hereby certifies that:

ARTICLE I - Name:

The name of the Limited Liability Company is:

Robin's Nest Mobile Diagnostics, LLC

ARTICLE II --- Address:

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

> 9350 Turkey Lake Road Orlando, Florida 32819

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:

Stephen Bravo, M.D. 9350 Turkey Lake Road Orlando, Elorida 32819

ARTICLE V --- Management:

The Limited Liability Company will be a member-managed company. The two members are Stephen Bravo, M.D. and Robert A. Posniak, M.D., whose address is 9350 Turkey Lake Road, Orlando, Florida 32819.

ARTICLE VI - Indemnification

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The Limited Liability Company shall intermify and hold harmless its members and managers against any and all claims and demands whatsbever.

Stephen Bravo, M.D. Authorized Signatory

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

Robin's Nest Mobile Diagnostics, 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, F.S.

Stephen Bravo, M.D.

Dated: January 13, 2011