

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : COMITER & SINGER, LLP  
Account Number : I20000000085  
Phone : (561) 626-4742  
Fax Number : (561) 626-4742

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: phabla@comitersinger.com

FLORIDA LIMITED LIABILITY CO.  
SURGICAL RADIATION PRODUCTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Corporate Filing Menu

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 10, 2011

Division of Corporations  
Via Facsimile

Re: Surgical Radiation Products, Inc.

Dear Sir or Madam:

Attached please find Articles of Dissolution for Surgical Radiation Products, Inc. along with Articles of Organization for Surgical Radiation Products, LLC. We formed the corporation in October in error, it should have been filed as an LLC. Please dissolve Surgical Radiation Products, Inc. and we hereby release the name so we can file Surgical Radiation Products, LLC. As you will note the parties are the same. Thank you and if you have any questions, please contact my attorney's paralegal, Patti K. Babka at 800-224-1484. Thank you for your time and consideration.

*Filed Separately*

Very truly yours,

  
John D. Corbett

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**SURGICAL RADIATION PRODUCTS, 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:**

142 JFK DRIVE  
ATLANTIS, FL 33462

**Mailing Address:**

SAME

**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:

**MICHAEL S. SINGER, ESQ.**

Name

**3801 PGA BLVD., SUITE 604**

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

**PALM BEACH GARDENS FL 33410**

City, State, and Zip

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*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)

(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:**

MGRM

JOHN D. CORBITT, JR.

142 JFK DRIVE

ATLANTIS, FL 33462

MGRM

LORI A. ANTHONY

10415 OAK MEADOW LANE

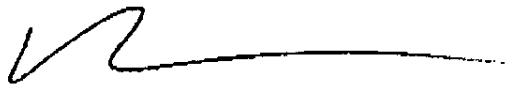
LAKE WORTH, FL 33467

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

MICHAEL S. SINGER, AUTHORIZED REPRESENTATIVE

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)