4001247/

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400261741654

08/11/14--01049--021

**130.00 FM L. 24 **2914 AUG 11 PH 4: 24

AUG 13 2014 D. BRUCE

COVER LETTER

TO: Registration Division of C	Section Corporations	•				
SUBJECT: Mr. Rog	dger's MRI. LLC Name of Lir	nited Liability Company				
The enclosed Articles	of Organization and fee(s) at	re submitted for filing.				
Please return all corre	spondence concerning this m	atter to the following:				
Rodger (Calhoun					
		Name of Person				
Mr. Rodo	per's MRI, LLC	Firm/Company	·			
<u>3748 Do</u>	e Run	Address				
Southpor	t. Florida 32409	City/State and Zip Code	H.	,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
rodger@mrrodg	ersmri.com	d for future annual report notifica	diam'	المالية المالي	20	
For further informatio	n concerning this matter, plea	•	uion)		2014 AUG 1	- CE-2
Rodger Calhoun Nan	at (at (at (at (at (at (850) 628-6148 Area Code Daytime Te	lephone Number	X-0F-S-IV	1 PH 4: 2	The state of the s
Enclosed is a check for	or the following amount:				24	
□ \$125.00 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Certificate of St Certified Copy (additional copy is	atus &	d)	

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Mr. Rodger's MRI. LLC (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	Paragonal Annie de La	
The mailing address and street address of the principal of		
Principal Office Address:	Mailing Address:	
3748 Doe Run Southport, Florida 32409	3748 Doe Run Southport, Florida 32409	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own F another business entity with an active Florida registration	Registered Agent. You must designate an	individual or
The name and the Florida street address of the registered a	agent are:	
Rodger Calhoun		
Name		
3748 Doe Run	NOT	
Florida street address (P.O. Box	NOI acceptable)	
<u>Southport</u> City	FL 32409 Zip	
·	•	
Having been named as registered agent and to accept ser the place designated in this certificate, I hereby accept		
capacity. I further agree to comply with the provisions of	f all statutes relating to the proper and co	mplete performance
of my duties, and I am familiar with and accept the obli	gations of my position as registered agen er 605, F.S	t as provided for in
De Dan	7 003, 1 .5.	<u>설</u> . 월
Registered Agent's Signatu	ure (REQUIRED)	AUG TH
(CONTINUE	ED)	\$ = T
Page 1 of 2		PH 4: 24

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager MGR	Redger Calhoun	
MGR	Rodger Calhoun 3748 Doe Run	
	Southport, FL 32409	
		
(Use attachment if necessary) EV: Effective date, if other than the cective date is listed, the date must be of filing.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90	days
E V: Effective date, if other than the certive date is listed, the date must be of filing.) E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90	days
E V: Effective date, if other than the certive date is listed, the date must be of filing.) E VI: Other provisions, if any.	date of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90	days
E V: Effective date, if other than the certive date is listed, the date must be of filing.) E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90	day
E V: Effective date, if other than the certive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90	days
E V: Effective date, if other than the certive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	e specific and cannot be more than five business days prior to or 90	day
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document	days
E V: Effective date, if other than the cetive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u	member or an authorized representative of a member. a 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.	day
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in	member or an authorized representative of a member. a 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. a formation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)	days
E V: Effective date, if other than the deceive date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation used in a management of the constitutes at third degree for the constitutes at third degree for the constitutes at third degree for the constitutes at the co	member or an authorized representative of a member. a 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. a formation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)	days
E V: Effective date, if other than the decetive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in	member or an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein are true. 1 of ormation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)	7
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. Signature of a (In accordance with section constitutes an affirmation upon I am aware that any false in constitutes a third degree for the section constitutes a third degree for the section constitutes at third degree for the section constitutes at the section constitutes	member or an authorized representative of a member. a 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. a formation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)	7
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. Signature of a (In accordance with section constitutes an affirmation upon I am aware that any false in constitutes a third degree for the section constitutes a third degree for the section constitutes at third degree for the section constitutes at the section constitutes	member or an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein are true. 1 of ormation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)	£
E V: Effective date, if other than the cettive date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u I am aware that any false ir constitutes a third degree for Rodger Cally	member or an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein are true. 1 formation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.) Oun Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent	7