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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383
From: GAIL S. ANDRE
Account Name : LOWMEES, BROSDICK, DOSTER, KANTOR & PERRY, P.A.
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PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

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FLORIDA LIMITED LIABILITY CO.
TITAB IMAGING CONSULTANTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION
OF
TITAB IMAGING CONSULTANTS, LLC

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TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of this limited liability company is Titab Imaging Consultants, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

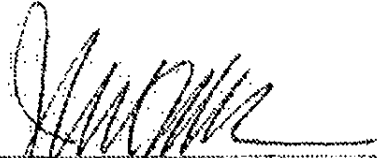
The mailing address and street address of the principal office of the Company is 10231 Cove Lake Drive, Orlando, Florida 32836.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is I. Paul Mandelkern.

ARTICLE IV - MANAGEMENT

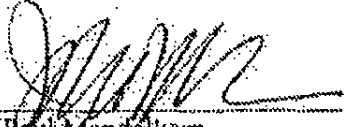
The Company is manager-managed for the purposes of Section 605.0407, Florida Statutes, and other relevant provisions of Chapter 605, Florida Statutes, and the initial manager of the Company is John W. Ross.



I. Paul Mandelkern, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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 605, Florida Statutes.



I. Paul Mandelkern