

Division of Corporations Electronic Filing Cover Sheet

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# FLORIDA LIMITED LIABILITY CO. UNIVERSAL IMAGING & RADIOLOGY NORTH MIAMI BEACH LLC

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To:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

## UNIVERSAL IMAGING & RADIOLOGY NORTH MIAMI BEACH, LLC

(Must contain 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:	Mailing Address:
88 NE 168th STREET	12905 SW 42 STREET TE 210
NORTH MIAMI BEACH, FL 33162	MIAMI, FL 33175

## 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:

EXPRESS CORPRO	DATE FILING SERV	<u>VIĆE IN</u> C
•	Name	-
12905 SW 42 STRE	EET STE 210	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	ceptable)
MIAMI	FL '	33175
City	State	Zip

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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

23 JAN - 3 FILLS: 35

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.  IORGE MARTINEZ  Typed or printed name of signee	Title: "AMBR" – Autho "MGR" = Manag		Name and Address:	
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