

Division of Corporations

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Florida Department of State
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From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561) 686-3307
Fax Number : (561) 686-5442

LIMITED LIABILITY COMPANY

Gulfstream Diagnostics, L.L.C.

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**ARTICLES OF ORGANIZATION
OF
GULFSTREAM DIAGNOSTICS, L.L.C.**

I, the undersigned authorized representative of the Members, hereby makes, acknowledges and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

GULFSTREAM DIAGNOSTICS, L.L.C.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office is:

500 East Osceola Street, Suite 101
Stuart, Florida 34994

**ARTICLE IV
MANAGEMENT**

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Manager, and the name and address of the Manager is:

Name

Linda L. Ferguson

Street Address

500 East Osceola Street, Suite 101
Stuart, Florida 34994


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Gary N. Gerson, Esquire (Florida Bar No. 251771)
Nason, Yeager, Gerson, White & Lioce, P.A.
1645 Palm Beach Lakes Blvd., Suite 1200
West Palm Beach, FL 33401
Phone: (561) 686-3307

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IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 28th day of October, 1999.



Gary N. Gerson, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

GULFSTREAM DIAGNOSTICS, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Gary N. Gerson
1645 Palm Beach Lakes Blvd.
Suite 1200
West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.



Gary N. Gerson, Registered Agent

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