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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FÖREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

- 1. Name of foreign limited liability company: Positron Imaging Technology, L.L.C.
- 2. Jurisdiction under the law of which foreign limited liability company is organized: Texas.
- 3. FEI number: 74-2935747.
- 4. Date of organization: November 1, 1999.
- 5. Duration: Perpetual.
- 6. Date of first transaction of business in Florida: January 2, 2001.
- 7. Street office of principal office: c/o Lucas Medical Associates, Inc., 1250 S. Capital of Texas Hwy., #2-400, Austin, Texas 78746.
- 8. Limited liability company is a manager-managed company.
- 9. The usual business addresses of the managing members or managers are as follows:

Wm. Fred Lucas, M.D. Lucas Medical Associates, Inc. One Cielo Center, Suite 285 1250 S. Capital of Texas Hwy. Austin, Texas 78746 William F. Lucas, Jr. Lucas Medical Associates, Inc. One Cielo Center, Suite 285 1250 S. Capital of Texas Hwy. Austin, Texas 78746 Vince Montsinger 316 Fox Hunters Courts
Powell, TN 37845 S

- 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized.
- 11. Nature of business or purposes to be conducted or promoted in Florida: Mobile P.E.T. units to the medical community.

Signature of member

Typed name of signee: William F. Lucas, JR.

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 o	f the Limited Liabil	ity Compan	y is:				
	POSITRON	IMAGING	TECH	NOLOGY, L.L.C.			
2. The name a	nd the Florida street	address of	the regi	stered agent and office are:			
	C T Corporation Syste	:m					
			(Name)				
	c/o C T Corporation S				<u> </u>		
Florida street address (P.O. Box NOT ACCEPTABLE)			300				
						DEC 15 PM	
	Plantation		FL	33324		<u></u>	:
		(City/State	z/Zip	Y O	70	
liability compa- agent and agre- relating to the I	ny at the place designet to act in this capacitoroper and complete my position as registed System	nated in this ity. I further performanc	certifica r agree t e of my c	rvice of process for the above sate, I hereby accept the appoint o comply with the provisions of luties, and I am familiar with a sed for in Chapter 608, F.S	ment as <u>re</u> gisi of all statutes	?: 3	
KIRK HOOD ASSISTANT	(Signature) SECRETARY	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Design Certif	Fee for Application sation of Registered Agent ied Copy (optional) icate of Status (optional)			



IT IS HEREBY CERTIFIED that Articles of Organization of

POSITRON IMAGING TECHNOLOGY, L.L.C. File No. 7057957-22

were filed in this office and a certificate of organization was issued to this limited liability company, and no certificate of dissolution is in effect and the company is currently in existence.



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 11, 2000.

Elton Bomer Secretary of State BAM